RENTAL APPLICATION FORM

ADDRESS OF HOME APPLYING FOR		
	CITY	
DESIRED MOVE IN DATE		
RENTAL AMOUNT		

PLEASE COMPLETE THE ATTACHED CREDIT APPLICATION IN FULL. IF THERE ARE UNANSWERED QUESTIONS, THERE WILL BE A DELAY IN PROCESSING YOUR APPLICATION. PLEASE RETURN THIS APPLICATION TO SAM HELLER'S OFFICE EITHER DIRECTLY TO OUR OFFICE OR VIA THE MAIL, DEPENDING ON HOW SOON YOU ARE WANTING TO MOVE IN THE HOME YOU ARE APPLY FOR. PLEASE ALLOW TWO FULL DAYS FOR THE PROCESSING UNLESS YOUR CREDIT HISTORY IS FROM OUT OF STATE IN WHICH CASE IT CAN TAKE LONGER.

For your convenience the application along with the credit check fee in the form of a cashier's check or money order may be mailed to the P. O. Box noted below **OR** dropped of at:

DROP OFF ADDRESS: 25124 Spr

25124 Springfield Court, Suite 100

Valencia, California. 91355

Attn: Sam Heller

This address is located off Tourney Road between Valencia Blvd. and Magic Mountain Parkway. The building is just off Valencia Blvd. Look for the Keller Williams sign on the building.

MAILING ADDRESS:

SAM HELLER

P. O. BOX 802440

SANTA CLARITA, CA 91380-2440

THERE IS A \$24.00 PER MARRIED COUPLE OR \$ 15.00 PER INDIVIDUAL **MONEY ORDER OR CASHIER'S CHECK** FOR NON-REFUNDABLE CREDIT CHECK FEE MUST ALSO BE INCLUDED WITH THIS APPLICATION.

THE MONEY ORDER OR CASHIER'S CHECK MADE PAYABLE TO **CERTIFIED CREDIT**MUST ALSO BE INCLUDED. **NO PERSONAL CHECKS OR CASH CAN BE ACCEPTED**

EACH UNMARRIED ADULT THAT WOULD BE LIVING IN THE HOME MUST COMPLETE AN APPLICATION AND PAY THE CREDIT CHECK FEE. THIS DOES NOT INCLUDE TEEN-AGE CHILDREN.

ALL TENANTS OVER THE AGE OF 18 AGREE TO FURNISH OUR OFFICE WITH A COPY OF THEIR DRIVER'S LICENSE OR STATE IDENTIFICATION CARD (WHICHEVER IS APPLICABLE) PRIOR TO MOVE-IN.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL 661-259-9385. OUR FAX NUMBER IS 661-259-5748

PAGE 1 OF 4 RENTAL APPLICATION – PERSON #1

PLEASE PRINT CLEARLY – <u>ANSWER ALL QUESTIONS</u> – INCOMPLETES COULD CAUSE DELAYS.

NAME			
(FULI	L NAME, NO NICKNAM	ES. IF JR. OR II, PLEASE NOTE)	
SOCIAL SECURITY #		DATE OF BIRTH	
DRIVERS LICENSE #		STATE ISSUED FROM	
HOME PHONE #		WORK PHONE #	
CELL PHONE #		WORK PHONE #E-MAIL ADDRESS	
RENTAL HISTORY			
NAME OF OWNER/MANAGER		CURRENT RENT PHONE #	
NAME OF OWNER WANAGER		I HONL #	
	O YEARS, COMPLETE T	HE FOLLOWING:	
NAME OF OWNER/MANAGER		CURRENT RENT PHONE #	
TANKE OF OWNER WATANGER		THORE #	
EMPLOYMENT HISTORY			
CURRENT EMPLOYER			
ADDRESS			
PHONE #	SUDERVIS	OR'S NAME	
YOUR POSITION			
LENGTH OF EMPLOYMENT			
PREVIOUS EMPLOYER		ABOVE THEN COMPLETE FOLLOWING:	
PHONE #	CLIDEDVICOD'S NAME		
YOUR POSITION	ONE # SUPERVISOR'S NAME OUR POSITION		
MONTHLY/WEEKLY SALARY (GRO	OSS)		
LENGTH OF EMPLOYMENT			
BANKING REFERENCES NAME OF BANK		PHONE #	
BRANCH LOCATION			
CHECKING ACCOUNT #			
PERSONAL REFERENCES			
NAME		DIJONE #	
		DHONE #	
HOW LONG KNOWN		PHONE # RELATIONSHIP	
now Long Known			
NAME			
ADDRESS			
		PHONE #	
HOW LONG KNOWN		RELATIONSHIP	
PETS?	HOW MANY	WHAT ARE THEY?	
PETS?CHILDREN	HOW MANY	AGES	
			

WATER FILLED FURNITURE	
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WHAT

AGES _____

PAGE 2 OF 4 RENTAL APPLICATION – PERSON #2

PLEASE PRINT CLEARLY – ANSWER ALL OUESTIONS – INCOMPLETES COULD CAUSE DELAYS. (FULL NAME, NO NICKNAMES. IF JR. OR II, PLEASE NOTE) SOCIAL SECURITY # _______
DRIVERS LICENSE # ______
HOME PHONE # ______ DATE OF BIRTH ______STATE ISSUED FROM _____ WORK PHONE # CELL PHONE # E-MAIL ADDRESS RENTAL HISTORY PRESENT ADDRESS HOW LONG LIVED THERE _____ CURRENT RENT _____ NAME OF OWNER/MANAGER _____ PHONE # _____ IF LESS THAN TWO YEARS, COMPLETE THE FOLLOWING: PREVIOUS ADDRESS _____ HOW LONG LIVED THERE _____ CURRENT RENT _____ NAME OF OWNER/MANAGER ____ PHONE # _____ EMPLOYMENT HISTORY CURRENT EMPLOYER ADDRESS _____ PHONE #______ SUPERVISOR'S NAME ______
YOUR POSITION ______ LENGTH OF EMPLOYMENT IF WORKED LESS THAN TWO YEARS AT ABOVE THEN COMPLETE FOLLOWING: PREVIOUS EMPLOYER SUPERVISOR'S NAME_____ PHONE # YOUR POSITION MONTHLY/WEEKLY SALARY (GROSS) LENGTH OF EMPLOYMENT _____ BANKING REFERENCES NAME OF BANK PHONE # _______
BRANCH LOCATION ________
CHECKING ACCOUNT # _________ BALANCE ________ PERSONAL REFERENCES NAME _____ADDRESS _____ PHONE # HOW LONG KNOWN RELATIONSHIP _____ NAME _____ADDRESS _____ HOW LONG KNOWN _____ PETS? ____ HOW MANY _____ CHILDREN ____ HOW MANY _____ WHAT ARE THEY?

WATER FILLED FURNITURE	WHAT	
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PAGE 3 OF 4 RENTAL APPLICATION

BOTH APPLICANTS

		OBLIGATION OF A RENTAL AGREEMENT?
	J BEEN DELINQUENT IN PAYING YOUR F	RENT OR OTHER FINANCIAL OBLIGATIONS?
LICENSE NUMBER, MOI	DEL AND MAKE OF VEHICLES THAT WIL	L BE PARKED ON PREMISES:
	(THIS INCLUDES BOATS OR COL	LECTOR VEHICLES)
	HER RESIDENT OR OCCUPANTS EVER BE YES	EEN CONVICTED OF A FELONY? NO
HAVE YOU OR ANY OTI FELONY?		ECEIVED DEFERRED AUJUDICATION FOR A NO
NAME	NS TO CONTACT IN CASE OF AN EMERG	
RELATIONSHIP		
THE INFORMATION ON AUTHORIZE SAMUEL J. INVESTIGATIVE CREDI' THIS RENTAL APPLICA	HELLER TO VERIFY THE ABOVE INFORM TREPORT FROM CERTIFIED CREDIT ACC	ECT TO THE BEST OF MY KNOWLEDGE. I HEREBY MATION AND OBTAIN EITHER A CONSUMER OR CESS. I UNDERSTAND THE FEE FOR VERIFYING OT BE APPLIED TO ANY RENTS AND CANNOT BE
ALL APPLICANTS MUST	SIGN BELOW:	
SIGNATURE APPLIC	ZANT (1)	
SIGNATURE APPLIC	ZANT (2)	
* * * * * * * * * * * * * * * * * * *	********	******
PAYMENT	C.A.P.	VERIFIER