## **Signature Group Property Management**

1314 W. Florida Ste. 102 Hemet, CA 92543 Office (951) 658-1242 (951) 658-1246 Fax (951) 6589784

## **CHECKLIST**

Before we can begin processing your application, we need you to provide the following items:

Applicant:	Date:
Drivers license	
Social Security card	
Most recent 30 days of paystubs	
Award letter from: Social Security, AFDC, Food Stamps, Disa	bility
Most recent 30 days check stubs for: IHSS, RCOE, etc	
Child support documentation	
Name and phone # of current landlord	
Name and phone # of previous landlord	
Phone # to current Job	
Phone # to previous Job	
Additional:	

## **Signature Group Property Management Rental Interest Sheet** Date: Name: Phone: Date to move in: **Budget:** Number of occupants: Bedroom/Bathroom: Square footage: Location preference: School District: Smoke?: Pets: Yard: # of Stories: Additional preferences: For Office Use Only: 1st: 2nd:

Application to Kent	-		itact us at: 951-		
A separate application to rent is required for each of Applicant is:	ccupant 18 years of ag enant with co-tenant		an emancipate Jarantor/co-sign		
	sharic with co-tenant		arantor/co-sign	CI	
PERSONAL INFORMATION			. [		
Full Name:		Social Security	y Number: L		
,		Expires:			
	ork #:	Ot	her #:		
Email:					
Names of all other proposed occupant(s) and relation	onship to applicant:				
The same of the same proposed seempaint(s) and results	р со аррисани г				
Pet(s) or service animals (quantity & type):				,	
		License #	Color:		
Auto Make: Model: Ye	ear:	License #	Color:		
In case of emergency, notify:		Relationship:			
#ddress:		Phone #:			
1				ļ.	
Do any of the applicants plan to use liquid filled furn	niture?	Yes 🗌 No			
Has applicant been a party to an unlawful detainer a	action (eviction) with in	n the last 5 ye	ars? No 🗌		
If yes, When: County:		Explain:			
Те					
Has the applicant ever been convicted of or pleaded		. —	es 🗌		
If yes, When: County:		Charges:			
Has applicant ever been asked to move out of a resi	idence? Yes □	No Ex	plain:		
<u>T</u>					
RESIDENCE HISTORY Provide all addresses &	landlord phone #'s	for last 5 ve	ears. including	family members.	
Current address:		City/State/Zip			
		Do you own t	<u> </u>	Yes TI	
Landlord/Manager Name:	<del></del>		165   1		
Relative? Yes No If yes, Relation		Reason for lea			
Duay ious address.		City/Ctata/7in			
Prexious address:  From: To: Re		City/State/Zip Did you own t		Yes L	
Erom: To: Re Landlord/Manager Name:		anager Phone	· · <u>·</u>	res 🗀	
Relative? Yes No III If yes, Relation:	·	Reason for lea			
	· .				
Previous address:		City/State/Zip			
		Did you own t	· ·	Yes □	
Landlord/Manager Name:		anager Phone			
Relative? Yes No If yes, Relations	snip:	Reason for lea	aving?:		
Previeus address:		City/State/Zip	:		
	ent:	Did you own t	his property?	Yes 🗌	
Landlord/Manager Name:	llord/Manager Name: Landlord/Manager Phone Number:				
Relative? Yes 🗍 No 🗌 If yes, Relation	ship:	Reason for lea	aving?:		
Please attach separate piece of paper with ad	ditional Residence	history if ne	eded to go bac	ck 5 years.	

<b>EMPLOYMENT &amp; INCOME HISTORY</b>	Prov	Provide all employment & income for the last 2 years				
Any current supplemental/non-earned in	ncome? Yes	─ No	/pe:			
Any current supplemental/non-earned in	ncome? Yes	□ No 🔲 If Yes, Ty	/pe:			
(SSI, AFDC, IHSS, Child support or other	r)		,			
Current Employer:	J	F	rom:			
Address:		City/State	e/Zip			
Position or Title:		Phone #:				
Gross Income: per			Ļ			
Previous Employer:		From:		To:		
Address:		City/State		101		
Position or Title:		Phone #:				
Gross Income: per			l or Leaving?			
, ,				<del> </del>		
Previous Employer:		From:		To:		
Address:		City/State				
Position or Title:		Phone #:				
Gross Income: per		Reason fo	or Leaving?			
CREDIT INFORMATION						
Creditor Acc	ount #	Monthly F	Payment	Balance Due		
			-			
1		Ţ,				
Name of Bank Branch/Loca		Account #	#	Balance		
ĺ						
		*	·			
·		1				
PERSONAL REFERENCES						
Name: Add	dress:					
Length of Acquaintance:	Occu	pation:				
Name: Add	dress:	,				
Length of Acquaintance:	Occu	pation:				
Name: Add	dress:	,				
Length of Acquaintance:	Occu	pation:				
,		,				
Applicant understands and agrees: (i) the	is is an applica	tion to rent only an	d does not	guarantee that app	licant will be	
offered the Premises; and (ii) Landlord and Manager or Agent may accept more than one application for the Premises and,						
using their sole discretion, will select the best qualified applicant.						
Applicant represents the above information to be true and complete, and hereby authorizes Landlord, Manager,						
and/or Agent to: (i) verify the information provided; and (ii) obtain credit report on applicant.						
Applicant Signature			Date			

Signature Group Property Management 1314 W. Florida Ave Ste. 102 Hemet Ca. 92543 Office (951) 658-1242 Fax (951) 6589784

Authorization to release of information

I also agree that a photocopy or fax copy of this document shall be as valid as the original and will suffice as an authorized signature to release on all financial, rental, employment, and credit accounts related to this transaction. Please print all information.

Applicant page (first priddle lact)			
Applicant name (first, middle, last)			
Social Security number			
-			
Current Street address			
Current City, State, Zip			
Date of Birth			
Today's date			
,			
Applicant signature			