

RESIDENTIAL APPLICATION TO RENT OR LEASE

Classic Properties | 1819 West Olive Avenue, Burbank, CA 91506 | Tel: (818) 843-7850 Fax: (818) 842-2127

This application may be submitted to Denise at: dcanino@jackbilt.com

<input type="checkbox"/> 1011 West Olive Ave.	<input type="checkbox"/> 920 West Angelino Ave.	<input type="checkbox"/> 10918 Bloomfield St.
<input type="checkbox"/> 10920 Bloomfield St.	<input type="checkbox"/> 10920 1/2 Bloomfield St.	<input type="checkbox"/> 10922 Bloomfield St.

PERSONAL INFORMATION

Name of Applicant: _____ Date of Birth: ___/___/___
 Driver's License No. _____ State Issued: _____ SSN: _____
 Reason for Moving: _____
 Telephone Number: (Day) _____ (Night) _____
 E-Mail address: (Primary) _____

AUTOMOBILES OWNED

Make: _____ Model: _____ Year: _____
 Color: _____ License Plate #: _____

Make: _____ Model: _____ Year: _____
 Color: _____ License Plate #: _____

RENTAL HISTORY (PLEASE INCLUDE AT LEAST FIVE (5) YEARS, USE OTHER SIDE IF NECESSARY)

Present Address: _____
 City: _____ State: _____ Zip: _____
 How Long? _____ Owned/Rented? Owned Rented
 Manager's Name: _____ Phone Number: _____

Prior Address: _____
 City: _____ State: _____ Zip: _____
 How Long? _____ Owned/Rented? Owned Rented
 Manager's Name: _____ Phone Number: _____

Prior Address: _____
 City: _____ State: _____ Zip: _____
 How Long? _____ Owned/Rented? Owned Rented
 Manager's Name: _____ Phone Number: _____

EMPLOYMENT HISTORY (PLEASE INCLUDE AT LEAST FIVE (5) YEARS, USE OTHER SIDE IF NECESSARY)

Present Employer: _____ How Long? _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Supervisor: _____ Salary: _____
 Phone Number(s): _____

Prior Employer: _____ How Long? _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Supervisor: _____ Salary: _____
 Phone Number(s): _____

PLEASE BE ADVISED:

THERE IS A THIRTY DOLLAR (\$30.00) FEE DUE UPON SUBMISSION OF THIS RENTAL APPLICATION

Prior Employer: _____ How Long? _____
Address: _____
City: _____ State: _____ Zip: _____
Supervisor: _____ Salary: _____
Phone Number(s): _____

CREDIT REFERENCES

Bank Name: _____ Checking/Savings/Both/Other? [Your selection...](#)
Address: _____
City: _____ State: _____ Zip: _____
Phone Number(s): _____
Checking Account #: _____
Savings Account #: _____
Other Account #: _____

Bank Name: _____ Checking/Savings/Both/Other? [Your selection...](#)
Address: _____
City: _____ State: _____ Zip: _____
Phone Number(s): _____
Checking Account #: _____
Savings Account #: _____
Other Account #: _____

LOANS AND OTHER CREDIT (PLEASE USE OTHER SIDE IF NECESSARY)

Bank/Company Name: _____ Type? _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number(s): _____
Account #: _____

Bank/Company Name: _____ Type? _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number(s): _____
Account #: _____

Bank/Company Name: _____ Type? _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number(s): _____
Account #: _____

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LOCAL PERSONAL REFERENCES

Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Occupation: _____ Years Known: _____

Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Occupation: _____ Years Known: _____

OTHER OCCUPANTS (SEPARATE APPLICATION MAY BE REQUIRED FOR ADULT OCCUPANTS)

Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____

Pet(s): _____

(If allowed, additional security deposit may be required)

I hereby consent to Classic Properties obtaining my credit history through access to a computerized data bank in connection with the leasing of the above unit. I agree that such credit investigation is reasonable related to a legitimate business purpose involving the undersigned. I have been advised that such investigation may contain opinions concerning my credit-worthiness.

I have been advised that:

- a. I may, within a reasonable time after signing this Consent, request, in writing, that the person(s) who obtained my credit history make a complete and accurate disclosure of the nature and scope of the investigation requested and that, by law, the person(s) who obtained my credit history are required to make such disclosure in writing no later than five (5) days after I request disclosure.
- b. A procedure exists to dispute the accuracy of any credit information on me I believe to be erroneous and that such procedure gives me the right to request re-investigation, to request deletion of inaccurate information and to dispute in writing information I believe to be incorrect, as more particularly set forth in California Civil Code section 1785.34 et seq, and 15 United States Code Section 1681 et seq.

I also understand that such requests should be directed to the company providing the credit information, Experian Consumer Asst., P.O. Box 2002, Allen, TX 75013-0036 (888) 397-3742

I understand that neither the Credit Bureau nor Subscriber can guarantee the accuracy of the credit report, and hereby agree to and do release them from any and all responsibility therefore, and agree to hold them harmless for any loss or damage which I may suffer due to any false or inaccurate reports.

Signature: _____ Date: _____

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