

# APPLICATION TO RENT

## A Better Way Property Management

P.O. Box 1845 Chino, CA. 91708  
 Phone (909) 355-1135 Fax (909) 355-1136

Application to rent property at \_\_\_\_\_

**Full name of applicant** \_\_\_\_\_ **Co-applicant/spouse** \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Date of birth \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Date of birth \_\_\_\_\_

Present address \_\_\_\_\_ Present address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Name of current landlord/manager \_\_\_\_\_ Name of current landlord/ manager \_\_\_\_\_

Landlord/ manager's phone ( ) \_\_\_\_\_ Landlord/ manager's phone ( ) \_\_\_\_\_

How long at present address \_\_\_\_\_ How long at present address \_\_\_\_\_

Reason for leaving \_\_\_\_\_ Reason for leaving \_\_\_\_\_

List prior address(es), landlord/manager's name(s), phone number(s), and length of tenancy \_\_\_\_\_

Name(s) and ages of all other occupant(s) and relationship to applicant \_\_\_\_\_

Pet(s) number and type \_\_\_\_\_

An application to rent is required for any occupant 18 years of age or over

**Applicant:** Soc. Sec. No. \_\_\_\_\_ Driver's license no. \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_

Present employer \_\_\_\_\_ Supervisor \_\_\_\_\_ How long with this employer \_\_\_\_\_

Employer's address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Position or title \_\_\_\_\_ Gross income \$ \_\_\_\_\_ per \_\_\_\_\_

Other income \$ \_\_\_\_\_ per \_\_\_\_\_ Source \_\_\_\_\_

Auto make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License no. \_\_\_\_\_ State \_\_\_\_\_ Color \_\_\_\_\_

If present employment is less than one year, list immediate prior employment information \_\_\_\_\_

In case of emergency, person to notify \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**Co-applicant:** Soc. Sec. No. \_\_\_\_\_ Driver's license no. \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_

Present employer \_\_\_\_\_ Supervisor \_\_\_\_\_ How long with this employer \_\_\_\_\_

Employer's address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Position or title \_\_\_\_\_ Gross income \$ \_\_\_\_\_ per \_\_\_\_\_

Other income \$ \_\_\_\_\_ per \_\_\_\_\_ Source \_\_\_\_\_

Auto make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License no. \_\_\_\_\_ State \_\_\_\_\_ Color \_\_\_\_\_

If present employment is less than one year, list immediate prior employment information \_\_\_\_\_

In case of emergency, person to notify \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Does either applicant plan to use liquid filled furniture? (circle one) No Yes Type \_\_\_\_\_

Has either applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years? (circle one) No Yes

If yes, explain \_\_\_\_\_

If given this property, when would you like to take possession? \_\_\_\_\_

It requires the amount of \_\_\_\_\_ to rent this property. Do you have these funds available? (circle one) Yes

No

Realistically and honestly, how long would you estimate that you would be occupying this property? \_\_\_\_\_

**Credit Information**

Appl./Co-appl	Name of creditor	Account number	Monthly payment	Balance due

**Bank Account Information**

Appl./Co-appl	Name of bank	Address/branch	Account number	Type of account

The property shall be occupied only by the person(s) named in this application. Applicant(s) represent(s) the above information to be true, correct, and complete and hereby authorize(s) verification of the information provided, including obtaining credit report(s). **A fee of \$20.00 per person or \$35.00 per married couple is due with this application.** If disapproved prior to obtaining credit report, money will be refunded in full. Applicant(s) understand(s)

and agree(s) that the landlord may terminate any rental agreement entered into for any misrepresentation made above. Credit report is available to applicant only through the credit reporting agency.

Applicant \_\_\_\_\_ Date \_\_\_\_\_ Co-applicant \_\_\_\_\_ Date \_\_\_\_\_

Phone(day) \_\_\_\_\_ (eve.) \_\_\_\_\_ Phone(day) \_\_\_\_\_ (eve.) \_\_\_\_\_