Office Address: 2961 Hwy 32 #2 CHISO, CA95977 (Cosplete Allera Congress) 3-1808 Mailing Address: PO BOX 63 CHICO, CA 95927 (Call Sections must be completed)

Individual applications required from each occupant 18 years of age or older

APPLYING FOR:				
Apt No. E-MAIL ADDRESS:	Rent Amt	Per		
How did you hear about rental?	Expected Move-In Date:	Expected Move-In Date:		
Name:	Phone: <u>(</u>)			
Last First Middle				
Social Security #: Driver's Lic and State:	Birthdate:	Month-Day-Year		
LIST ALL ADDITIONAL OCCUPANTS WHO WILL RESIDE IN UN	NIT	World - Day- Tear		
Name:	Date of Birth:			
Name:	Date of Birth:			
Name:				
Name:	Date of Birth:			
RENTAL HISTORY				
Current Address:				
	Unit# City State	Zip		
How Long: From (Month/Year): To:				
Owner/Manager: Tel:	Reason for leaving:			
Previous Address Street	Unit# City State	Zip		
How Long: From (Month/Year): To:	·	•		
· · · · · · · · · · · · · · · · · · ·	T			
Owner/Manager: Tel:				
Second Previous Address Street	Unit# City State	Zip		
How Long: From (Month/Year): To:	Rent Paid:	·		
Owner/Manager: Tel:	D ()			
CURRENT EMPLOYMENT				
Company Name: Addr	ress:			
Phone: Occupation:				
Name of Supervisor: Dates of Employ	ment – From:	o:		
PREVIOUS EMPLOYMENT				
Company Name: Addr	ress:			
Phone: Occupation:				
Name of Supervisor: Dates of Employ	ment – From: T	·o:		
ADDITIONAL INFORMATION 1. Have you ever had any credit problems? Yes No 2. Have you ever had an unlawful detainer filed against you? Yes 3. Have you ever been evicted for non-payment of rent or for any of the second secon	other reason?			

BANKING INFORMATION Name of Bank/S&L/Credit Union: Branch Address: ____ Approx. Bal. _____ ____ Approx. Bal. _____ Savings # Checking # Branch Address: Name of Bank/S&L/Credit Union: Checking # _____ Approx. Bal. ____ Savings # ____ Approx. Bal. ____ **CREDIT REFERENCES (Credit Cards/Car Payments/Other Loans)** Company Name: _____ Address/City: Present Balance: _____ Monthly Payment: _____ Account# Company Name: _____ Address/City: _____ Present Balance: Monthly Payment: Account# Company Name: Address/City: Account# Present Balance: Monthly Payment: PERSONAL REFERENCES Address & City Phone Name Time Known Relationship **EMERGENCY CONTACT** Name: Address: Phone: () Relationship: **VEHICLES (Operable Automobiles including Trucks, Vans, Motorcycles)** Year: ______ Make: ______ Color ______ License# ______ State: _______ Model: Color License# State: Year: Make: Applicant represents that all of the above statements are true and correct and hereby authorizes their verification including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references on request. Owner/Agent is authorized to obtain a credit report now and in the future. In connection with my application for rental and/or employment, I understand that background inquires may be made on myself including consumer, criminal, driving and other reports. Employment reports may include information as to my character, work habits, performance and experience along with reasons for termination of past employment from previous employers. I understand that information may be requested from various federal, state and other agencies and entities, public and private, which maintain records concerning my past activities relating to driving, credit,

criminal, civil and other experiences as well as claims involving me in insurance company files.

I authorize, without reservation, any party or agency contacted, to furnish completely and without limitation, any and all of the above mentioned information and any other information related thereto. Further, I will release from liability and will defend and hold harmless all requesters and suppliers of information in accordance herewith.

The undersigned makes application to rent housing accommodations designated for the amount and location as set forth above and upon approval of this application agrees to sign a rental or lease agreement and to pay all sums due, including requested deposits before occupancy.

Dated:	 		