



RENTAL APPLICATION

Address of Rental Unit Applying For: _____

Desired Move-In Date: _____

PERSONAL INFORMATION

First Name: _____ M.I.: ____ Last Name: _____

Phone #: _____ Alternate Phone #: _____

Email Address: _____

Date of Birth: _____ Social Security #: _____

Driver's License #: _____ State Issued: ____ Expiration: _____

RENTAL HISTORY (Past five years)

Current Address: _____

City: _____ State: _____ Zip: _____

How Long at This Address: _____ Monthly Rent: \$ _____

Landlord/Manager Name: _____ Phone #: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

How Long at This Address: _____ Monthly Rent: \$ _____

Landlord/Manager Name: _____ Phone #: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

How Long at This Address: _____ Monthly Rent: \$ _____

Landlord/Manager Name: _____ Phone #: _____

EMPLOYMENT HISTORY

Current Employer

Company Name: _____ Address: _____

Position: _____ How Long Employed: _____

Supervisor's Name: _____ Phone #: _____

Work Address: _____

City: _____ State: _____ Zip: _____

Previous Employer

Company Name: _____ Address: _____

Position: _____ How Long Employed: _____

Reason for Leaving: _____

Supervisor's Name: _____ Phone #: _____

City: _____ State: _____ Zip: _____

FINANCIAL INFORMATION

Present Income: \$ _____ per month OR \$ _____ annually

Additional Income (if applicable): _____

ROOMMATES / OTHER OCCUPANTS (please include children and ages)

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

PERSONAL REFERENCES

Reference Name: _____ Phone #: _____

Relationship: _____

Reference Name: _____ Phone #: _____

Relationship: _____

VEHICLE INFORMATION

Vehicle 1 Make: _____ Model: _____ Year: _____ Color: _____

Plate #: _____ State: _____

Vehicle 2 Make: _____ Model: _____ Year: _____ Color: _____

Plate #: _____ State: _____

PERSONAL HISTORY

Do you smoke? Yes No

Please note: In accordance with the City of Fresno ordinance, this is a non-smoking property. Smoking is strictly prohibited anywhere on the property, including inside units, balconies, and all common areas.

Have you ever been convicted of a crime? Yes No

If yes, please explain: _____

Have you ever been evicted or asked to vacate a rental property? Yes No

If yes, please explain:

Are you willing to consent to a background and credit check? Yes No

APPLICANT CERTIFICATION & SIGNATURE

Applicant certifies that all information provided is true and correct.

Applicant authorizes verification of employment, income, rental history, credit, and background check as permitted by law.

_____ Print Name

_____ Applicant Signature

_____ Date

Total # of Applicants: _____ Application Fee Amount: \$ _____ Paid