



APPLICATION TO RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 11/13)

I. APPLICATION TO RENT

THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.

1. **Applicant is completing Application as a (check one)** tenant, tenant with co-tenant(s) or guarantor/co-signor.
Total number of applicants _____

2. **PREMISES INFORMATION**
Application to rent property at _____ ("Premises")
Rent: \$ _____ per _____ Proposed move-in date _____

3. **PERSONAL INFORMATION**

A. FULL NAME OF APPLICANT _____

B. Date of Birth _____ (For purpose of obtaining credit reports. Age discrimination is prohibited by law.)

C. Social Security No. _____ Driver's License No. _____
State _____ Expires _____

D. Phone Number: Home _____ Work _____ Other _____

E. Email _____

F. Name(s) of all other proposed occupant(s) and relationship to applicant _____

G. Pet(s) or service animals (number and type) _____

H. Auto: Make _____ Model _____ Year _____ License No. _____ State _____ Color _____
Other vehicle(s): _____

I. In case of emergency, person to notify _____
Relationship _____
Address _____ Phone _____

J. Does applicant or any proposed occupant plan to use liquid-filled furniture? No Yes Type _____

K. Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years? No Yes
If yes, explain _____

L. Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony? No Yes
If yes, explain _____

M. Has applicant or any proposed occupant ever been asked to move out of a residence? No Yes
If yes, explain _____

4. **RESIDENCE HISTORY**

| | |
|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Current address _____ | Previous address _____ |
| City/State/Zip _____ | City/State/Zip _____ |
| From _____ to _____ | From _____ to _____ |
| Name of Landlord/Manager _____ | Name of Landlord/Manager _____ |
| Landlord/Manager's phone _____ | Landlord/Manager's phone _____ |
| Do you own this property? <input type="checkbox"/> No <input type="checkbox"/> Yes | Did you own this property? <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Reason for leaving current address _____ | Reason for leaving this address _____ |

5. **EMPLOYMENT AND INCOME HISTORY**

| | |
|--------------------------------------------|--------------------------------------------|
| Current employer _____ | Previous employer _____ |
| Current employer address _____ | Prev. employer address _____ |
| From _____ To _____ | From _____ To _____ |
| Supervisor _____ | Supervisor _____ |
| Supervisor phone _____ | Supervisor phone _____ |
| Employment gross income \$ _____ per _____ | Employment gross income \$ _____ per _____ |
| Other income info _____ | Other income info _____ |

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Applicant's Initials (_____) (_____)

Reviewed by _____ Date _____



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| | | | |
|---------------|--------------|------------|----------------------------------|
| Agent: - | Phone: _____ | Fax: _____ | Prepared using zipForm® software |
| Broker: _____ | | | |

Property Address: _____ Date: _____

6. CREDIT INFORMATION

| Name of creditor | Account number | Monthly payment | Balance due |
|------------------|----------------|-----------------|-------------|
| | | | |
| | | | |

| Name of bank/branch | Account number | Type of account | Account balance |
|---------------------|----------------|-----------------|-----------------|
| | | | |
| | | | |

7. PERSONAL REFERENCES

Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____
 Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____

8. NEAREST RELATIVE(S)

Name _____ Address _____
 Phone _____ Relationship _____
 Name _____ Address _____
 Phone _____ Relationship _____

Applicant understands and agrees that: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; (ii) Landlord or Manager or Agent may accept more than one application for the Premises and, using their sole discretion, will select the best qualified applicant, and (iii) Applicant will provide a copy of applicant's driver's license upon request.

Applicant represents the above information to be true and complete, and hereby authorizes Landlord or Manager or Agent to: (i) verify the information provided; and (ii) obtain a credit report on applicant and other reports, warnings and verifications on and about applicant, which may include, but not be limited to, criminal background checks, reports on unlawful detainers, bad checks, fraud warnings, employment and tenant history. Applicant further authorizes Landlord or Manager or Agent to disclose information to prior or subsequent owners and/or agents.

If application is not fully completed, or received without the screening fee: (i) the application will not be processed, and (ii) the application and any screening fee will be returned.

Applicant _____ Date _____ Time _____

Return your completed application and any applicable fee not already paid to: _____
 Address _____ City _____ State _____ Zip _____

II. SCREENING FEE

THIS SECTION TO BE COMPLETED BY LANDLORD, MANAGER OR AGENT.

Applicant has paid a **nonrefundable** screening fee of \$ _____, applied as follows: (The screening fee may not exceed \$30.00, adjusted annually from 1-1-98 commensurate with the increase in the Consumer Price Index. A CPI inflation calculator is available on the Bureau of Labor Statistics website, www.bls.gov. The California Department of Consumer Affairs calculates the applicable screening fee amount to be \$42.06 as of 2009.)

\$ _____ for credit reports prepared by _____ ;
 \$ _____ for _____ (other out-of-pocket expenses); and
 \$ _____ for processing.

The undersigned has read the foregoing and acknowledges receipt of a copy.

Applicant Signature _____ Date _____

The undersigned has received the screening fee indicated above.

Landlord or Manager or Agent Signature _____ CalBRE Lic. # _____ Date _____

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Reviewed by _____ Date _____

