



APPLICATION TO RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 4/03)

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 EMANICIPATED MINOR.

Applicant is completing Application as a (check one) [ ] tenant [ ] tenant with co-tenant(s) or [ ] guarantor/co-signor.

Total number of applicants \_\_\_\_\_

PREMISES INFORMATION

Application to rent property at \_\_\_\_\_ ("Premises")
Rent: \$ \_\_\_\_\_ per \_\_\_\_\_ Proposed move-in date \_\_\_\_\_

PERSONAL INFORMATION

FULL NAME OF APPLICANT \_\_\_\_\_
Social Security No. \_\_\_\_\_ Driver's license No. \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_
Phone Number: Home \_\_\_\_\_ Work \_\_\_\_\_ Other \_\_\_\_\_
Name(s) of all other proposed occupant(s) and relationship to applicant \_\_\_\_\_
Pet(s) or service animals (number and type) \_\_\_\_\_
Auto: Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License No. \_\_\_\_\_ State \_\_\_\_\_ Color \_\_\_\_\_
Other vehicle(s): \_\_\_\_\_
In case of emergency, person to notify \_\_\_\_\_ Relationship \_\_\_\_\_
Address \_\_\_\_\_ Phone \_\_\_\_\_
Does applicant or any proposed occupant plan to use liquid-filled furniture? [ ] No [ ] Yes Type \_\_\_\_\_
Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years? [ ] No [ ] Yes
If yes, explain \_\_\_\_\_
Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony? [ ] No [ ] Yes
If yes, explain \_\_\_\_\_
Has applicant or any proposed occupant ever been asked to move out of a residence? [ ] No [ ] Yes
If yes, explain \_\_\_\_\_

RESIDENCE HISTORY

Current address \_\_\_\_\_ City/State/Zip \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_
Name of Landlord/Manager \_\_\_\_\_ Landlord/Manager's phone \_\_\_\_\_
Do you own this property? [ ] No [ ] Yes
Reason for leaving current address \_\_\_\_\_
Previous address \_\_\_\_\_ City/State/Zip \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_
Name of Landlord/Manager \_\_\_\_\_ Landlord/Manager's phone \_\_\_\_\_
Did you own this property? [ ] No [ ] Yes
Reason for leaving this address \_\_\_\_\_

EMPLOYMENT AND INCOME HISTORY

Current employer \_\_\_\_\_ Supervisor \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_
Employer's address \_\_\_\_\_ Position or title \_\_\_\_\_ Supervisor's phone \_\_\_\_\_
Employment gross income \$ \_\_\_\_\_ per \_\_\_\_\_ Phone number to verify employment \_\_\_\_\_
Previous employer \_\_\_\_\_ Other \$ \_\_\_\_\_ per \_\_\_\_\_ Source \_\_\_\_\_
Employer's address \_\_\_\_\_ Supervisor \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_
Position or title \_\_\_\_\_ Supervisor's phone \_\_\_\_\_
Employment gross income \$ \_\_\_\_\_ per \_\_\_\_\_

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APPLICATION TO RENT/SCREENING FEE (LRA PAGE 1 OF 2)

Agent: \_\_\_\_\_ Phone: 831 464-0444 Fax: 831 462-4263 Prepared using WINForms® software
Broker: Sherman & Boone Property Management 4450 Capitola Suite-101, Capitola CA 95010

Applicant's Initials ( ) ( )
Reviewed by \_\_\_\_\_ Date \_\_\_\_\_



Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

CREDIT INFORMATION

Name of creditor	Account number	Monthly payment	Balance due

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

PERSONAL REFERENCES

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

NEAREST RELATIVE(S)

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

Applicant understands and agrees: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; and (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.

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 credit report on applicant.

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 \$ 20.00, 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.)

\$ 11.50 for credit reports prepared by CCI Profiles;  
\$ \_\_\_\_\_ for \_\_\_\_\_ (other out-of-pocket expenses); and  
\$ 8.50 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 \_\_\_\_\_ Date \_\_\_\_\_

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Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

