

A-Creative Property Management Inc.
16152 Beach Blvd, Suite #101, Huntington Beach, CA 92647
T: 714-842-8080 F: 714-842-8020 Email: acpmchristean@verizon.net

RESIDENTIAL RENTAL APPLICATION

Instructions to Applicant: Please use black ink. Except for your signature, all information in this Application must be PRINTED in a clear and legible manner. Application must be filled out in its entirety. Applicant must show satisfactory identification to owner/manager at the time this Application is submitted for processing.

PROPERTY STREET ADDRESS		UNIT #/CITY/STATE/ZIP		RENTAL RATE PER MONTH \$	
INTENDED START DATE:		HOW DID YOU HEAR ABOUT THIS VACANCY?		SECURITY DEPOSIT \$	
APPLICANT INFORMATION					
LEGAL NAME OF APPLICANT – FIRST		LAST		MIDDLE	
CURRENT ADDRESS				CITY	
				STATE & ZIP	
DATE OF BIRTH	HOME PHONE		CELL PHONE	WORK PHONE	
OTHER NAMES KNOWN BY			EMAIL ADDRESS		
HOW LONG DO YOU EXPECT TO STAY?		PETS? IF YES, WHAT KIND? HOW MANY and SIZE?		IN CASE OF EMERGENCY NOTIFY & NEAREST RELATIVE NAME/RELATIONSHIP/PHONE	
APPLICANT RESIDENCE HISTORY FOR PAST 5 YEARS-START WITH PRESENT RESIDENCE					
STREET ADDRESS/CITY/STATE/ZIP			LANDLORD NAME AND PHONE NUMBER		MOVE IN/OUT DATES
1.					
2.					
3.					
APPLICANT EMPLOYMENT HISTORY FOR PAST 5 YEARS-START WITH PRESENT EMPLOYER					
EMPLOYER NAME & PHONE			POSITION		MONTHLY INCOME
1.					
2.					
3.					
OTHER PERSONS TO OCCUPY THE PROPERTY					
FULL NAME		RELATIONSHIP		AGE	OCCUPATION
VEHICLE INFORMATION					
YEAR		COLOR/MAKE/MODEL			LICENSE PLATE #

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APPLICANT REFERENCES (OTHER THAN RELATIVES)		
NAME	Address	PHONE
1.		
2.		
APPLICANT BANK REFERENCES		
APPLICANT BANK REFERENCES	BRANCH/PHONE/ACCOUNT NUMBER/DATE OPENED/PRESENT	BALANCE
CHECKING		
SAVINGS		
OTHER		
YOUR CREDIT HISTORY		
WHY ARE YOU LEAVING YOUR CURRENT ADDRESS?		
DO YOU INTEND TO HAVE WATER FILLED FURNITURE? Yes _____ No _____		
HAVE YOU OR DO YOU INTEND TO POSSESS, SELL OR USE ILLICIT DRUGS OR NARCOTICS IN OR ABOUT YOUR RESIDENCE? Yes _____ No _____		
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? IF YES, GIVE DETAILS: Yes _____ No _____		
ANY (CHECK ALL THAT APPLY): LAW SUITS <input type="checkbox"/> JUDGEMENTS <input type="checkbox"/> BANKRUPTCY <input type="checkbox"/> FORECLOSURES <input type="checkbox"/> IF YES, GIVE DETAILS: Yes _____ No _____		
HAVE YOU EVER BEEN EVICTED OR REFUSED TO PAY RENT FOR ANY REASON? IF YES GIVE DETAILS: Yes _____ No _____		

AUTHORIZATION

Release of Information:

The undersigned Applicant hereby offers to rent/lease real property described herein as THE PROPERTY. Applicant has no rights to said property until a Rental Agreement/Lease is duly executed *after* the approval of this Application. A non-refundable credit check fee of \$_____ to process this Application and an Application Deposit of \$_____ will be given by Applicant to the owner/manager when this Application is turned in for processing. The Application Deposit is fully refundable if Applicant is rejected or if written notice revoking this offer is received by the owner/manager prior to acceptance of this offer.

Applicant represents all information in this Application to be true and accurate and authorizes owner/manager and his/her/its employees and agents to verify said information in person, by mail, phone, fax, or otherwise, to determine Applicant's rental, credit, financial and character standing. Applicant hereby releases owner/manager, his/her/its employees and agents, Core Logic, its employees and agents and any and all other firms or persons investigating or supplying information, from any liability whatsoever concerning the release and/or use of said information and further, will defend and hold them harmless from any suit or reprisal whatsoever. All holders, public and private, of any such information are hereby authorized to release, without reservation or limitation, any and all such information they have concerning Applicant and in so doing, will be acting on Applicant's behalf at Applicant's request and will be held blameless and without any liability whatsoever. A copy, fax, or other reproduction of this Authorization shall be as effective as the original.

Name of Applicant (please print)

Signature

Date

VERIFICATION OF APPLICANT'S EMPLOYMENT REFERENCE

CURRENT

PRIOR

Date: _____

From: A Creative Property Management
16152 Beach Blvd, Suite #101
Huntington Beach, CA 92647
T: 714-842-8080 F: 714-842-8020
Email: acpmchristean@verizon.net

To: _____
EMPLOYER

Work Phone: _____

Fax: _____

Email: _____

Attention: _____

Attention: _____

Re: Applicant _____

Applicant SS#: _____

Applicant DOB: _____

The above-named applicant has applied with us for rental housing. The following information is required in order for us to give proper consideration to his/her application. The confidentiality of the information you furnish will be preserved except where disclosure is required by law. Your prompt response is most appreciated. Thank you in advance for your attention to this request!

I have applied for rental housing with the above-referenced company and have stated that I am now or was formerly employed by you. I hereby authorize the release of information requested in this letter to the above-named person and/or company. Your prompt reply will help to facilitate the consideration of my application for housing.

X _____
APPLICANT DATE

1. Applicant's date of employment. From: _____ To: _____

2. Present or last position: _____

3. Probability of continued employment: _____

4. Rate of pay \$ _____ per hour week month

5. Average monthly paycheck: Gross \$ _____ Net \$ _____

6. Average monthly overtime, commissions, bonuses and/or tips \$ _____

7. Year to date earnings \$ _____ Prior year's earnings \$ _____

8. If no longer employed, the reason for leaving: _____

Any additional comments which would aid in the evaluation of this person's application for rental? _____

NAME (please print) _____

SIGNATURE _____

TITLE _____

DATE _____

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HUNTINGTON BEACH, CA 92647
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VERIFICATION OF TENANCY

Applicant's Name: _____

Current Address: _____

Previous Address: _____

Company Name or Person: _____

Phone Number: (____) _____

How long did tenant reside at above address? _____

Does/did tenant pay rent on time? Monthly Rent: \$ _____ Yes ___ No ___

Does the tenant owe money? Yes ___ No ___ Amount owed \$ _____

Have there been any problems with tenant, tenant's family or guest disturbing neighbors?

Yes ___ No ___ Explain: _____

Was there a problem with persons not on the lease residing in the unit? Yes ___ No ___

Did tenant or guest damage the unit beyond normal wear and tear? Yes ___ No ___

Explain _____

Did tenant give a 30-day notice? Yes ___ No ___

Would you rent to this tenant again? Yes ___ No ___

Did tenant leave unit clean and ready for next tenant? Yes ___ No ___

COMMENTS: _____

Permission to verify given by: _____

Signature

Printed Name

Date

Property Managers Signature: _____