

3900 ADELINE

WWW.3900ADELINE.COM

TENANT GUARANTOR

3900 ADELINE STREET, EMERYVILLE, CA 94608
PHONE 510.653.3900 FAX 510.452.2973

APPLICATION TO RENT

Last Name	First Name	Middle Name	Social Security Number
Other Names used in the last 10 years		Work Phone Number	Home Phone Number
Date of Birth	E-mail Address		Mobile/Cell Phone Number

Driver's License	Expiration	State	Other ID
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Present Address		City	State	Zip
Date In	Date Out	Owner/Agent Name	Owner/Agent Phone Number \$ / Month	
Reason for Moving			Current Rent	

Previous Address		City	State	Zip
Date In	Date Out	Owner/Agent Name	Owner/Agent Phone Number	
Reason for Moving				

Next Previous Address		City	State	Zip
Date In	Date Out	Owner/Agent Name	Owner/Agent Phone Number	
Reason for Moving				

Proposed occupants, please list all in addition to yourself.	Name		Name	
	Name		Name	
	Name		Name	

Will you have pets?	Describe	Will you have a waterbed?	Describe
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I AM AM NOT a member of the Armed Forces (Including the National Guard and Reserves)

Present occupation or source of income		Employer Name		
How long with employer?		Supervisor's Phone Number	Employer Address	
Name of Supervisor		City	State	Zip

Prior occupation		Employer Name		
How long with employer?		Supervisor's Phone Number	Employer Address	
Name of Supervisor		City	State	Zip

Individual applications required from each occupant **18 years of age or older.** (All sections must be completed.)

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\$ Week Month Year

Current Gross Income | Per | **Please list ALL of your financial obligations below:**

Name of your Bank: _____ Branch or address: _____

Name of Creditor	Address	Phone Number	Monthly Payment Amount

In case of emergency, notify	Address: Street, City, State, Zip	Relationship	Phone

Personal references	Address: Street, City, State, Zip	Length of acquaintance	Occupation	Phone

Automobile | Make _____ | Model _____ | Year _____ | License # _____

Automobile | Make _____ | Model _____ | Year _____ | License # _____

Other motor vehicles

Have you ever filed for bankruptcy? No Yes ; Have you ever been evicted or asked to move? No Yes

Have you ever been convicted of selling, distributing or manufacturing illegal drugs? No Yes

A Madison Park Community

Applicant represents that all the above statements are the true and correct and hereby authorizes verification of the above items including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request. Applicant consents to allow Owner/Agent to disclose tenancy information to previous or subsequent Owners/Agents.

Owner/Agent will require a payment of \$ _____, which is to be used to screen Applicant with respect to credit history and other background information. The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search , and /or other screening reports \$ _____
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) \$ _____
3. Total fee charged (cannot exceed \$30 per applicant, which may be adjusted annually with the CPI as of 1-1-98) \$ _____

The undersigned is applying to rent the premises designated as: _____

Apt. No. _____ Located at _____

The rent for which is \$ _____ per _____. Upon approval of this application, and execution of a rental/lease agreement, the Applicant shall pay all sums due, including required security deposit of \$ _____, before occupancy.

Date _____ Applicant (Signature Required) _____

