



# Application to Rent

Complete separate application for each adult tenant

**POWER PROPERTY GROUP**

8885 VENICE BLVD. SUITE 205  
LOS ANGELES, CA 90034  
TEL:310.593.3955  
FAX:310.661.8195

WWW.POWERPROPERTYGRP.COM

**Desired Property/Unit** \_\_\_\_\_ **Shown by** \_\_\_\_\_

**1** Name \_\_\_\_\_ Social Security #: \_\_\_\_\_  
LAST FIRST MIDDLE

**2** Driver's Lic. ID #: \_\_\_\_\_ State \_\_\_\_\_ Birthdate \_\_\_\_\_  
MM-DD-YY

**3** Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email: \_\_\_\_\_

**CURRENT**

Address: \_\_\_\_\_  
STREET UNIT# CITY STATE ZIP

How Long? From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Last Rent Paid: Month \_\_\_\_\_ Amt. \$ \_\_\_\_\_

Owner/Manager \_\_\_\_\_ Tel: \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**4 PREVIOUS**

Address: \_\_\_\_\_  
STREET UNIT# CITY STATE ZIP

How Long? From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Last Rent Paid: Month \_\_\_\_\_ Amt. \$ \_\_\_\_\_

Owner/Manager \_\_\_\_\_ Tel: \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**5 SECOND PREVIOUS**

Address: \_\_\_\_\_  
STREET UNIT# CITY STATE ZIP

How Long? From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Last Rent Paid: Month \_\_\_\_\_ Amt. \$ \_\_\_\_\_

Owner/Manager \_\_\_\_\_ Tel: \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**CURRENT EMPLOYMENT**

Company Name \_\_\_\_\_ Address \_\_\_\_\_

Company Phone \_\_\_\_\_ Occupation/Position \_\_\_\_\_ Type of Business \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Dates of Employment- From: \_\_\_\_\_ To: \_\_\_\_\_ Monthly Salary \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Company Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Occupation/Position \_\_\_\_\_ Type of Business \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Dates of Employment- From: \_\_\_\_\_ To: \_\_\_\_\_ Monthly Salary \_\_\_\_\_

WHEN DO YOU PLAN TO MOVE IN? Date: \_\_\_\_\_

Applicant represents that the statements made are true and correct and authorizes Owner's verification of credit, income and references; and APPLICANT UNDERSTANDS AND AGREES THAT ANY MISREPRESENTATION AND/OR OMISSION IS GROUNDS FOR EVICTION. Applicant agrees to pay for said credit verification. Such payment is a part of the application process and is a charge for the administrative costs of application consideration. If Applicant pays by a personal check which is returned "NSF", applicant shall be liable for the charge on demand. The undersigned makes application to rent housing accommodations designated as:

I hereby apply to rent/lease Apartment No. \_\_\_\_\_ at \_\_\_\_\_

for \$ \_\_\_\_\_ per month and upon approval of my Application and signed Rental Agreement, I agree to pay the first month's rent of \$ \_\_\_\_\_ and a security deposit in the amount of \$ \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**For purposes of credit & rent liability only: LIST ALL ADDITIONAL ADULTS AND CHILDREN WHO WILL OCCUPY UNIT.**

Please put "F" for full time or "P" for part time after each name.

If this box is checked there shall be no additional occupant(s).

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

**ADDITIONAL INFORMATION**

1. Have you ever had any credit problems?  Yes  No

2. Have you ever had an unlawful detainer filed against you?  Yes  No

3. Have you ever been evicted for non-payment of rent or for any other reason?  Yes  No

4. Have you ever filed bankruptcy?  Yes  No

5. Have you ever been convicted of a felony?  Yes  No

6. Do you have any animals?  Yes  No If Yes, How many? \_\_\_\_\_ Describe: \_\_\_\_\_

7. Will you be using any water-filled furniture in your residence?  Yes  No

If Yes, do you have insurance coverage?  Yes  No

8. Do you have any musical instruments?  Yes  No If yes, what kind \_\_\_\_\_

9. Do you smoke?  Yes  No Does any other proposed occupant smoke?  Yes  No

10. Please explain any "YES" answers. \_\_\_\_\_

**BANKING INFORMATION**

Name of Bank/S&L/Credit Union \_\_\_\_\_ Branch or Address \_\_\_\_\_

Checking #: \_\_\_\_\_ Approx. Bal. \_\_\_\_\_ Savings #: \_\_\_\_\_ Approx. Bal. \_\_\_\_\_

Name of Bank/S&L/Credit Union \_\_\_\_\_ Branch or Address \_\_\_\_\_

Checking #: \_\_\_\_\_ Approx. Bal. \_\_\_\_\_ Savings #: \_\_\_\_\_ Approx. Bal. \_\_\_\_\_

Other sources of income \_\_\_\_\_

**CREDIT REFERENCES (Credit Cards/Car Payments/Other Loans)**

Company Name \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Company Name \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Company Name \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Company Name \_\_\_\_\_ Address/City: \_\_\_\_\_

Account #: \_\_\_\_\_ Present Balance \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

**EMERGENCY CONTACT**

Name \_\_\_\_\_ Address \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**VEHICLES (Operable Automobiles including Trucks, Vans, Mortorcycles)**

Are you the registered owner?  Yes  No If not who? \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

**TENANT SCREENING PRODUCT - PRICE LIST** (fees are non-refundable; Cashier's Check, Money Order or Credit Card only)

Tenant Screening Product	Price	Check Box to Order
Prospects/Co-Signers	\$45.00	<input type="checkbox"/>
<p>Signed release in order to verify credit ( <u>must be signed</u> )                      Applicant represents that statements made are true and correct and hereby authorizes verification of references to include but not limited to credit checks, unlawful detainer checks &amp; credit checks and agrees to furnish additional credit references on request. I authorize verification of the information contained herein solely for the purpose of establishing my qualifications as a tenant. I release anyone verifying such information or providing information, from liability. I understand that incomplete or incorrect information provided in the application, may cause a delay in processing and can result in denial of tenancy.</p>		

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

**CREDIT CARD - For Credit Card Billing, Please Input Information Below (fees are non-refundable)**

*NOTE: Please be aware that the SCREENING FEE will appear as "Screening Pros" on your statement.*

Name (as it appears on card): \_\_\_\_\_

Address: \_\_\_\_\_  
STREET UNIT# CITY STATE ZIP

Credit Card #: \_\_\_\_\_ 3-Digit Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

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**EMAIL/FAX/MAIL/DROP-OFF COMPLETED APPLICATION, FEES & DOCUMENTS**

Please send this completed **Application, Fees** (include cashier's check, money order or credit card authorization), along with **2 forms of ID** and **last recent month of paystubs**:

**Email** - Email all documents to [edi@powerpropertygrp.com](mailto:edi@powerpropertygrp.com) OR

**Fax** - Fax all documents to 310-661-8194 OR

**Mail/Drop-off** - Drop off or mail all documents to P.O. Box 472 Culver City, CA. 90232

*No application will be complete until our office receives all documentation.*