



# APPLICATION TO LEASE

The following must be completed in its entirety and verified prior to consideration for occupancy. All documents provided by applicant will be retained with this application.

For Office Use Only	
Property Name	Apt #
Move-In Date	Apt. Type
Staff Member	Rent

**PLEASE PRINT**

## PERSONAL INFORMATION

LAST NAME		FIRST NAME	
Gov't Issued Photo ID#/State	Social Security Number	Date of Birth	
Current Phone #	Cell Phone #	E-mail Address	
Names of others who will occupy apartment			

## RESIDENTIAL HISTORY

Current address (Number, Street, City, Zip)		If apartment, name of complex	
		Dates of Residency	
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	House <input type="checkbox"/>	Apartment <input type="checkbox"/>
		Room <input type="checkbox"/>	
To whom do you make payments?		Monthly payment \$	
Name			
Address		Phone # ( )	
City	State	Zip	
Previous address (Number, Street, City, Zip)		If apartment, name of complex	
		Dates of Residency	
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	House <input type="checkbox"/>	Apartment <input type="checkbox"/>
		Room <input type="checkbox"/>	
To whom did you make payments?		Monthly payment \$	
Name			
Address		Phone # ( )	
City	State	Zip	

## INCOME

Current Employer (if employed)		Dates of Employment	
Address		From	
City		To	
State		Phone # ( )	
Zip			
Type of business	Position	Income \$	<input type="checkbox"/> Annually <input type="checkbox"/> Monthly
Other verifiable income	Annually	Description	
	Monthly		
\$	Annually	Description	
	Monthly		
\$	Annually	Description	
	Monthly		
\$	Annually	Description	
	Monthly		
\$	Annually	Description	
	Monthly		

## FINANCIAL

Checking: Bank and branch	Acct. #
Savings: Bank and branch	Acct. #
Other Assets (if needed to qualify)	

<b>FINANCIAL (Continued)</b>		
Have you ever filed bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when _____	If yes, date of discharge _____	
County and state where filed _____		
Have you ever had any suits, liens, judgments, evictions or repossessions? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Describe _____	County and State _____	
Describe _____	County and State _____	
Describe _____	County and State _____	

**CURRENT FINANCIAL OBLIGATIONS (Please list ALL monthly payments)**

Name	Address	Account Type

**VEHICLES**

How many vehicles do you own? \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_  
 (cars, trucks)

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

PARKING OF RECREATION VEHICLES, BOATS, TRAILERS OR COMMERCIAL VEHICLES ON THE PROPERTY IS PROHIBITED UNLESS DESIGNATED AREA IS PROVIDED.

**EMERGENCY INFORMATION** In case of Emergency, please notify

<i>First Emergency Contact</i>		
Last Name	First Name	Relationship
Address		Phone Number
<i>Second Emergency Contact</i>		
Last Name	First Name	Relationship
Address		Phone Number

**HOW DID YOU FIRST LEARN OF THIS APARTMENT COMMUNITY?**

Apartment Guide  
  Drive By  
  Referral  
  Anza Community  
  Apts.com  
  Flyer  
 For Rent.com  
  Craigslist  
  Signs  
  Website  
  Other Not Listed

**REASON FOR RELOCATION:** \_\_\_\_\_

This application is made for the purpose of procuring rental of the herein described premises, and for credit clearance. Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to investigate my credit, financial, litigation and rental history. I authorize you to obtain reports that may include credit reports, investigative consumer reports, unlawful detainer (eviction) reports, bad check searches, social security number verification and previous tenant and employment history.

I hereby agree to release and hold harmless the property, its owners, Anza Management Company, their agents and employees from any and all liability, legal proceedings and costs including attorney's fees arising out of either the verification of the information contained on this application form or the release of this information to other parties. All of the above data and information set forth herein including, but not limited to the statement of my assets, income and financial condition is warranted to be true and accurate and to fully and correctly state my financial conditions as of the date of this application.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

