

RENTAL APPLICATION ***THIS IS A STRICT NON-SMOKING BUILDING****

The undersigned hereby makes application to rent Apt. ____ located at 1751 University Avenue, San Diego, CA, beginning on _____ , 2024, at a monthly rent of \$_____. Your rent includes: Gas, Trash, Water/Sewer, Hot & Cold Water. Residents pay Electricity.

PLEASE TELL US ABOUT YOURSELF

FULL NAME	PHONE ()
Date of Birth	Social Security No
Driver's License	State
Other Occupants & your Relation to them:	
Are you applying with a Guarantor?	_Your Email address:
Maximum occupancy requirements under C	ity and State laws are strictly enforced.
No Pets are allowed. No Subletting or Assig	nments are allowed. This rental is for one-year minimum.
This is	a strict non-smoking building.

PLEASE GIVE US YOUR RENTAL HISTORY (Beginning with most current)

CURRENT ADDRESS		Rent \$
City	State	Zip
Month & Year Moved in	Reason for Leaving	
Owner or Agent	Phone ()	
PREVIOUS ADDRESS		Rent \$
City	State	Zip
Month & Year Moved in	Reason for Leaving	
Owner or Agent	Phone ()	

PLEASE GIVE US YOUR EMPLOYMENT INFORMATION

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PREVIOUS EMPLOY	ER			
Address where employe	ed:			
Supervisor		Supervisor's or Company Phone		
Salary \$	per	Company's Phone		
PLEASE LIST YC	OUR BANK A	AND CREDIT REFER	ENCES	
Savings Account Bank_		Branc	ch	
Checking Account Bank	K	Brane	ch	
Major Credit Card (nam	ne)	Major Cred	it Card (name)	
Will you be paying rent	with a foreign c	heck?		
HAVE YOU EVER:	Filed for ban	kruptcy?		
	Any aliases?			
	Been evicted	from tenancy?		
	Been convic	Been convicted of a crime?		
	Are you bein	g helped with a City or State	housing agency?	
What is their contact inf	fo?			
Do you have any outstan	nding/unpaid pa	rking or speeding tickets?		
Do you have any outstan	nding/unpaid ho	spital bills, or other unpaid bi	ills?	
Are you leaving your la	st residence on §	good terms?		
Are you a smoker?				
May we contact your pr	esent and prior	Landlords?		
Were you ever in Landl	ord/Tenant cour	t before? Are there	any judgments against you?	
Have you finished or wi	ill you finish yo	ur present Lease term?		
Were you ever late with	any rental payr	nents? Amount of t	times late?	
Are you a Smoker?	Do	you have any animals?		
Do you or will you serv	e time in the mi	litary during this Lease term?		
If yes, please enter exac	t address of stat	ion		
Emergency Contact:		Address	Phone	
Emergency Contact:		Address	Phone	
Emergency Contact:		Address	Phone	

A copy of Photo ID for <u>all</u> Applicants and Guarantors must be submitted with all applications along with references from Employers & Landlords.

Please also include a letter about yourself, so we can get to know you.

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A SEPARATE FORM MUST BE COMPLETED FOR EACH APPLICANT WITH THE REQUIRED FEE of \$65.00.

Please tell us how you heard about out property. _____

RELEASE

I, _______, the Applicant, give full authorization for a credit & background report. I also authorize Landlords, Business Associates, Broker, if any, Banks and other persons or institutions to furnish any information regarding me. I understand that there is a non-refundable Security Deposit, if Agreement to rent is cancelled by me <u>after</u> my acceptance of the above mentioned apartment. Please return this Rental Application to: *LittleTown Realty, LLC.* - with the required one month Deposit payable to LittleTown Realty, LLC. by **Cashier's, Bank Check, or Money Order only**, and documents with the required Photo ID for each applicant. Application Fee: \$75.00

Any Real Estate Broker/Agent commissions are paid by Applicant(s) before or at Lease signing.

Signed_____Date_____