

Safer Properties

386 City Center Drive Rohnert Park, Ca 94928 (707) 280-2057 propertymanagement@safer-properties.com

PROPERTY ADDRESS:	Date:
REQUESTED MOVE IN DATE:	

Please submit the following items in order for us to process your application:

General Applications and Co-signers

*Application form <u>ALL THREE PAGES</u> filled out completely and signed

(Each adult +18 applicant or co-signer must fill out an application)

*Application form can be downloaded at:

www.safer-properties.com/property-management/

Required Documentation:

- *Proof of income, most recent 90 days (Paycheck Stubs, LES, Bank Statements, Tax Returns)
- *Verification of current employment (Employers Info and Contact)
- *Copy of current driver's license or other acceptable identification
- *Scan and email the completed application & other documents to:

propertymanagement@safer-properties.com (Click email to open email)

- *A \$500.00 Holding Fee (Single Check)
- *A \$35.00 Credit Report Fee for <u>each adult application</u> or co-signer (Single Check)

(Note: this fee is non-refundable)

- *Please place Holding Fee & Credit Report Fee checks in the dropbox to the left of our office door. Make checks out to "Safer Properties".
- *(Our office is located at: 386 City Center Drive, Rohnert Park, CA 94928)

Please indicate prospective rental address on the memo line of checks.

Student Applications

- *Application form as described above.
- *Must have Co-signer. **SEPARATE** applications for student and co-signer!
- *Proof of income, most recent thirty days (Paycheck Stubs)
- *Verification of employment
- *Copy of current driver's license or other acceptable identification
- *Scan and email documents as described above



RENTAL APPLICATION

Please fill out this form completely and sign where indicated

PERSONAL.	INFORMATIC	N:								
FIRST NAME			Ν	MIDDLE		LAST		SS#		
DATE OF BIRTH	H		Ι	Oriver's License #	STA	ΛTE	I	Phone #		
CURRENT ADD	RESS		C	CITY	STA	ATE	2	ZIP		
LENGTH OF TI	ME		C	CURRENT LANDLORD	1		I	LANDLORD PHONE		
REASON FOR L	EAVING		ı		AM	OUNT OF RENT	I	EASE ENI	D DATE	
PREVIOUS ADD	RESS		C	CITY	STA	ATE	7	IIP		
REASON FOR L	EAVING		- 		LAN	NDLORD	I	ANDLOR	D PHONE	
PREVIOUS ADD	RESS		(CITY	STA	STATE		IIP		
REASON FOR LEAVING				LANDLORD		I	LANLORD PHONE			
PROPOSED	OCCUPANTS	S:								
NAME			RELAT	ELATIONSHIP		OCCUPATION		AGE		
NAME	E RELA			ATIONSHIP		OCCUPATION			AGE	
NAME	NAME RELAT			ATIONSHIP		OCCUPATION			AGE	
NAME	NAME RELAT		RELAT	TIONSHIP		OCCUPATION			AGE	
NAME	NAME RELAT		RELAT	TIONSHIP		OCCUPATION			AGE	
PROPOSED	PET(S):									
NAME TYPE/B		PE/BRE	REED WI		WEIGHT		AGE			
NAME TYPE/BR		PE/BRE	REED WEIGHT		IGHT AGE		AGE			
VEHICLE(S)	INFORMATION	ON:						•		
YEAR	MAKE	MAKE		MODEL	COLOR		PLATE #		STATE	
YEAR	MAKE			MODEL	COLOR		PLATE#		STATE	

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CURRENT EMPLOYER	OCCUPATION HOURS/WEEK			
SUPERVISOR	PHONE	YEARS EMPLOYED		
ADDRESS	CITY/STATE/ZIP			
CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK		
SUPERVISOR	PHONE	YEARS EMPLOYED		
ADDRESS	CITY/STATE/ZIP			

INCOME:

CURRENT INCOME	SOURCE	PROOF OF INCOME
CURRENT INCOME	SOURCE	PROOF OF INCOME
CURRENT INCOME	SOURCE	PROOF OF INCOME

EMERGENCY CONTACT INFORMATION:

EMERGENCY CONTACT	PHONE	EMAIL
RELATION	ADDRESS	CITY/STATE/ZIP
EMERGENCY CONTACT	PHONE	EMAIL
RELATION	ADDRESS	CITY/STATE/ZIP

APPLICANT QUESTIONNAIRE / AUTHORIZATION: CIRCLE ONE

HAS APPLICANT EVER BEEN SUED FOR BILLS?	Yes	No	HAS APPLICANT BEEN BROUGHT TO COURT BY LANDLORD?	Yes	No
HAS APPLICANT BEEN BANKRUPT?	Yes	No	HAS APPLICANT EVER VIOLATED RENTAL LEASE?	Yes	No
HAS APPLICANT BEEN GUILTY OF A FELONY?	Yes	No	HAS APPLICANT EVER PAID RENT LATE?	Yes	No
HAS APPLICANT EVER BROKEN A LEASE?	Yes	No	IS THE TOTAL MOVE IN AMOUNT AVAILABLE NOW?	Yes	No

APPLICANTS AUTHORIZE THE LANDLORD TO CONTACT PAST AND PRESENT LANDLORD, EMPLOYERS, CREDITORS, CREDIT BUREAUS, NEIGHBORS AND ANY OTHER SOURCES DEEMED NECESSARY TO INVESTIGATE APPLICANT. ALL INFORMATION PROVIDED ON THIS FORM IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF APPLICANTS KNOWLEDGE.

LANDLORD RESERVES THE RIGHT TO DISQUALIFY TENANT IF INFORMATION PROVIDED IS NOT AS PRESENTED. ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR PHOTOCOPY OF THIS FORM AT ANY TIME.

APPLICANT SIGNATURE:	DATE:
AFFLICANT SIGNATURE.	DAIL.