

DOCUMENTS REQUIRED TO SUBMIT RENTAL APPLICATION AT HUNTERS LANDING APARTMENTS

1. COMPLETED AND SIGNED APPLICATION
(Rental and employment verifications both need to be signed)
2. 4 CURRENT CHECK STUBS
3. COPY OF GOVERNMENT ISSUED ID
4. MONEY ORDER IN THE AMOUNT OF \$40 FOR APPLICATION FEE
5. A \$200 DOLLAR HOLD DEPOSIT IS REQUIRED. IF APPROVED IT
REDUCES DEPOSIT AMOUNT.

CRITERIA

You must make 2 ½ times the rental amount

You must have established good rental history

Your credit should be positive and reflect good payment history (we
require 680+ credit) Under 680 score requires double deposit if approved
(CREDIT SCORES UNDER 680 ACCEPTED ON A CASE BY CASE BASIS)

No evictions or property collections

No utility collections

We accept co-signers

Co-signer must exceed the requirements above, and sign a guarantee.
They are required to provide property tax statements (If home is owned)
and proof of income.

Each person over 18 that will be occupying the apartment must apply and
qualify separately. We will combine income

Evictions and property collections will not be accepted for any reason

RENTERS INSURANCE IS REQUIRED ON ALL APPROVED APPLICATIONS

☐ Tenant
☐ Guarantor

Name of Applicant: _____

APPLICATION TO RENT

(All sections must be completed)

Individual applications required from each occupant 18 years of age or older.

| | | | | | | | | |
|---|--|----------------|--|--|-------------------------|---------------------------------|----------|--|
| Last Name | | First Name | | Middle Name | | Social Security Number or ITIN | | |
| Other names used in the last 10 years | | | | Work phone number () | | Home phone number () | | |
| Date of birth | | E-mail address | | | | Mobile/Cell phone number () | | |
| Photo ID/Type | | Number | | Issuing government | | Exp. date | | |
| | | | | | | Other ID | | |
| 1. Present address | | | | | | | | |
| | | | | City | | State | | |
| | | | | | | Zip | | |
| Date in | | Date out | | Landlord Name | | Landlord phone number | | |
| Reason for moving out | | | | | | Current rent \$ /Month | | |
| 2. Previous address | | | | | | | | |
| | | | | City | | State | | |
| | | | | | | Zip | | |
| Date in | | Date out | | Landlord Name | | Landlord phone number | | |
| Reason for moving out | | | | | | Rent at move-out \$ /Month | | |
| 3. Next previous address | | | | | | | | |
| | | | | City | | State | | |
| | | | | | | Zip | | |
| Date in | | Date out | | Landlord Name | | Landlord phone number | | |
| Reason for moving out | | | | | | Rent at move-out \$ /Month | | |
| Proposed Occupants: List all in addition to yourself | | Name | | | Name | | | |
| | | Name | | | Name | | | |
| | | Name | | | Name | | | |
| Do you have pets? | | Describe | | | Do you have a waterbed? | | Describe | |
| How did you hear about this rental? | | | | | | | | |
| A. Current Employer Name | | | | Job Title or Position | | Dates of Employment | | |
| Employer address | | | | Employer/Human Resources phone number () | | | | |
| City, State, Zip | | | | Name of your supervisor/human resources manager | | | | |
| Current gross income | | | | Check one | | | | |
| \$ | | | | Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year | | | | |
| B. Prior Employer Name | | | | Job Title or Position | | Dates of Employment | | |
| Employer address | | | | Employer/Human Resources phone number () | | | | |
| City, State, Zip | | | | Name of your supervisor/human resources manager | | | | |
| Other income source _____ Amount \$ _____ Frequency _____ | | | | | | | | |
| Other income source _____ Amount \$ _____ Frequency _____ | | | | | | | | |



☐ Tenant
☐ Guarantor

Name of Applicant: _____

| Name of your bank | Branch or address | Account Number | Type of Acct |
|-------------------|-------------------|----------------|--------------|
| | | | |
| | | | |
| | | | |

Please list ALL of your financial obligations below.

| Name of Creditor | Address | Phone Number | Monthly Pmt. Amt. |
|------------------|---------|--------------|-------------------|
| | | () | |
| | | () | |
| | | () | |
| | | () | |
| | | () | |
| | | () | |
| | | () | |

| In case of emergency, notify: | Address: Street, City, State, Zip | Relationship | Phone |
|-------------------------------|-----------------------------------|--------------|-------|
| 1. _____ | | | |
| 2. _____ | | | |

| Personal References: | Address: Street, City, State, Zip | Length of Acquaintance | Occupation | Phone |
|----------------------|-----------------------------------|------------------------|------------|-------|
| 1. _____ | | | | |
| 2. _____ | | | | |

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Other motor vehicles: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____



☐ Tenant
☐ Guarantor

Name of Applicant:

NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT

☐ Landlord does not intend to request an investigative consumer report regarding the Applicant.

Unless the box above is checked, Landlord intends to request an investigative consumer report regarding the Applicant's character, general reputation, personal characteristics, and mode of living. Under Section 1786.22 of the California Civil Code, the files maintained on you by the investigative consumer agency shall be made available to you during business hours and on reasonable notice, provided you furnish proper identification, as follows: (1) You may appear at the investigative consumer reporting agency identified below in person, (2) you may make a written request for copies to be sent by certified mail to a specified addressee, or (3) you may make a written request for a summary of the file to be provided over the telephone. The agency may charge a fee, not to exceed the actual duplication costs, if you request a copy of your file. The agency is required to have personnel available to explain your file to you, and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. If you are accompanied by a person of your choosing, the agency may require you to furnish a written statement granting permission to the investigative consumer reporting agency to discuss your file in the other person's presence. The agency that will prepare the report(s) identified in this section is listed below:

Name of Agency

Address of Agency

If you would like a copy of the report(s) that is/are prepared, please check the box below:

☐ I would like to receive a copy of the report(s) that is/are prepared

If the box above is checked, Landlord agrees to send the report to Applicant within three (3) business days of the date the report is provided to Landlord. Landlord may contract with another entity to send a copy of the report.

Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agrees to furnish additional credit references upon request. Applicant authorizes Landlord to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history and employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or subsequent Landlords.

Landlord will require a payment of \$ 40.00, which is to be used to screen Applicant.

The amount charged is itemized as follows:

- | | |
|---|-----------------|
| 1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports | \$ <u>35.00</u> |
| 2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) | \$ <u>5.00</u> |
| 3. Total fee charged | \$ <u>40.00</u> |

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

Apt. No. _____ Located at 1205 E 22nd Street Marysville, CA 95901

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)



☐ Tenant
☐ Guarantor

Name of Applicant: _____

RECEIPT FOR TENANT SCREENING AND/OR CREDIT CHECKING FEES

On _____, Landlord received \$ 40.00 from the undersigned, hereinafter called "Applicant,"
(Date)

who offers to rent from Landlord the premises located at:

1205 E 22nd Street, Unit # (if applicable) _____
(Street Address)
marysville, CA 95901
(City) (Zip)

Payment is to be used to screen "Applicant". The amount charged is itemized as follows:

- | | |
|---|-----------------|
| 1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports | \$ <u>35.00</u> |
| 2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) | \$ <u>5.00</u> |
| 3. Total fee charged (cannot exceed the amount fixed by law) | \$ <u>40.00</u> |

For Landlord Use Only

Screening fees paid by: ☐ Cash ☐ Personal Check ☐ Cashier's Check ☒ Money Order

☐ Credit Card # (Last 4 digits only) _____ MC/VISA/AMEX Expiration Date: _____

Hunter's Landing Apts ☒ by [Signature], Pacific Capital Mgmt Agent for Landlord
Landlord Individual Signing for Landlord Management Co. (If Applicable)

Date _____

CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

The California Apartment Association supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

The California Apartment Association reaffirms its belief that equal opportunity can best be accomplished through effective leadership, education, and the mutual cooperation of owners, managers, and the public.

Therefore, as members of the California Apartment Association, we agree to abide by the following provisions of this Code for Equal Housing Opportunity:

- We agree that in the rental, lease, sale, purchase, or exchange of real property, owners and their employees have the responsibility to offer housing accommodations to all persons on an equal basis.
- We agree to set and implement fair and reasonable rental housing rules and guidelines and will provide equal and consistent services throughout our residents' tenancy.
- We agree that we have no right or responsibility to volunteer information regarding the racial, creed, or ethnic composition of any neighborhood, and we do not engage in any behavior or action that would result in "steering."
- We agree not to print, display, or circulate any statement or advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.



RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of applicants for rental housing.
- The Landlord requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. Please mail, fax, or email this form to the person listed in section 2 as soon as possible (within 24-48 hours)

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Rental Applicant Reference Form. I hereby acknowledge that the Landlord can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (____) _____
Signature _____ Date _____

TO BE COMPLETED BY LANDLORD

2. Person requesting the rental reference

Name of Landlord Hunter's Landing Apartments
Address 1205 E 22nd street Unit # _____
City Marysville State CA Zip 95901
Phone number (530) 743-5357 Email Kathryn@hunterslanding-apts.com
Fax number (530) 743-5050

3. Applicant's rental information

DO NOT COMPLETE BELOW ↓

Name of rental community (if any) _____
Address of rental unit _____ Unit # _____
City _____ State _____ Zip _____
Name of Landlord _____
Phone number (____) _____ Fax number (____) _____
Move-in date: Month _____ Year _____ Move-out date: Month _____ Year _____ or ☐ current resident



TO BE COMPLETED BY FORMER OR CURRENT LANDLORD

CAUTION: Do not include information about non-payment of "COVID-19 rental debt," which is unpaid rent or any other unpaid financial obligation of the resident under the tenancy that came due between March 1, 2020, and September 30, 2021.

4. Rental Reference Information

Residency

- a. Did Applicant live at your property during the period indicated above? ☐ Yes ☐ No
- b. If no, what were the dates of occupancy? From (month/year): _____ / _____ To (month/year): _____ / _____

Rent Payments:

- c. What was the last effective monthly rent? \$ _____
- d. How many times during the past 12 months did Applicant pay the rent late? ☐ 0 ☐ 1-2 ☐ 3-5 ☐ 6 or more
- e. Was any check from Applicant returned due to non-sufficient funds (NSF)? ☐ Yes ☐ No
- f. Did you ever file for an unlawful detainer against Applicant for unpaid rent? ☐ Yes ☐ No
- If yes, what was the result? _____

- g. Does Applicant owe any amount for delinquent rent? ☐ Yes ☐ No

Other Financial Obligations of Tenancy (i.e., utilities, parking fees, damage to the unit):

- h. How many times during the past 12 months did Applicant pay other financial obligations of tenancy late? ☐ 0 ☐ 1-2 ☐ 3-5 ☐ 6 or more
- i. Was any check from Applicant for other financial obligations of tenancy returned due to non-sufficient funds (NSF)? ☐ Yes ☐ No
- j. Did you ever file an unlawful detainer action (eviction) against Applicant for unpaid financial obligations of tenancy other than rent? ☐ Yes ☐ No
- If yes, what was the result? _____

- l. Does Applicant owe any amount for other financial obligations of tenancy? ☐ Yes ☐ No

Other Three-Day Notices

- m. Did you ever serve a Three-Day Notice to Applicant other than for non-payment of rent or other financial obligations of the resident under the tenancy? ☐ Yes ☐ No
- n. If yes, please explain: _____

Termination of Tenancy by Applicant

- o. If tenancy was terminated by Applicant, did Applicant provide notice for ending tenancy according to the terms of the rental agreement? ☐ Yes ☐ No

Information provided by: Name _____

Phone number (_____) _____ Email _____

Information obtained by: ☐ Phone ☐ Mail ☐ Email ☐ Fax



EMPLOYMENT VERIFICATION FORM

- This form is used to obtain information regarding the employment history of Applicants for rental housing. The information provided by the current or former Employer may be used solely for the purpose of evaluating the application for rental housing.
- The Landlord requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Employment Verification Form to the Landlord listed below.

I hereby acknowledge that the Landlord can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (____) _____

Signature _____ Date _____

TO BE COMPLETED BY LANDLORD

2. Person requesting the employment reference

Name of Landlord Hunter's Landing Apartments

Address 1205 E 22nd Street Unit # _____

City Manlyville State CA Zip 95901

Phone number (530) 743-5357 Fax number (530) 743-5050

3. Applicant's employment information:

☐ Present OR ☐ Prior Occupation (check one)

Employer Name _____

Employer Address _____

City _____ State _____ Zip _____

Supervisor's/HR Manager's Name _____ Employer/HR Phone number (____) _____

Beginning and Ending Dates of Employment _____

Current Gross Income (if applicable) \$ _____

TO BE VERIFIED BY CURRENT OR FORMER EMPLOYER

4. Employment information verification

Verification provided by:

Is the information provided in Section 3 above correct?

Name: _____

| | | |
|--|------------------------------|-----------------------------|
| Employer Name | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Employer Address | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Supervisor's/HR Manager's Name | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Employer/HR Phone Number | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Beginning and Ending Dates of Employment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Current Gross Income (if applicable) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Title: _____

Phone: (____) _____

If No, please explain: _____

Verification obtained by:

☐ Phone ☐ Mail ☐ Fax

