



Ofc: (562)-920-2440 / Fax: 562-920-6743

6116 Bellflower Blvd  
Lakewood, CA 90713

Apply online at [www.Skyline-Prop.com](http://www.Skyline-Prop.com)

Please provide copy of Driver License and most recent paystubs \$10.00 Application Fee

## APPLICATION TO RENT

**All sections must be completed. Individual applications required from each occupant 18 years of age or older.**

DRE# 012164722

<b>LAST NAME</b>		<b>FIRST NAME</b>		<b>MIDDLE NAME</b>		<b>SOCIAL SECURITY NUMBER</b>	
<b>DATE OF BIRTH</b>		<b>DRIVER LICENSE NO.</b>		<b>STATE</b>	<b>EMAIL ADDRESS</b>		
<b>HOME PHONE NUMBER</b>			<b>CELL PHONE NUMBER</b>			<b>WORK PHONE NUMBER</b>	
<b>1</b>	<b>PRESENT ADDRESS</b>			<b>CITY</b>		<b>STATE</b>	<b>ZIP CODE</b>
	<b>DATE IN</b>	<b>DATE OUT</b>	<b>OWNER/MGR NAME</b>		<b>OWNER/MGR PHONE NO.</b>		
	<b>REASON FOR MOVING</b>				<b>RENT AMOUNT</b>		
<b>2</b>	<b>PREVIOUS ADDRESS</b>			<b>CITY</b>		<b>STATE</b>	<b>ZIP CODE</b>
	<b>DATE IN</b>	<b>DATE OUT</b>	<b>OWNER/MGR NAME</b>		<b>OWNER/MGR PHONE NO.</b>		
	<b>REASON FOR MOVING</b>				<b>RENT AMOUNT</b>		
<b>3</b>	<b>NEXT PREVIOUS ADDRESS</b>			<b>CITY</b>		<b>STATE</b>	<b>ZIP CODE</b>
	<b>DATE IN</b>	<b>DATE OUT</b>	<b>OWNER/MGR NAME</b>		<b>OWNER/MGR PHONE NO.</b>		
	<b>REASON FOR MOVING</b>				<b>RENT AMOUNT</b>		

PROPOSED OCCUPANTS	NAME	DATE OF BIRTH	NAME	DATE OF BIRTH
<b>LIST ALL IN ADDITION TO YOURSELF</b>				

<b>WILL YOU Have pets?</b>	DESCRIBE (NAME, AGE WEIGHT AND TYPE)	<b>WILL YOU HAVE liquid filled furniture?</b>	DESCRIBE
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<b>A</b>	<b>PRESENT OCCUPATION</b>		<b>EMPLOYER NAME</b>
	How long with this employer?	<b>PHONE NUMBER</b>	<b>NAME OF SUPERVISOR / TITLE</b>
	<b>EMPLOYER ADDRESS</b>		<b>SALARY AMOUNT</b>
<b>B</b>	<b>PRIOR OCCUPATION</b>		<b>EMPLOYER NAME</b>
	How long with this employer?	<b>PHONE NUMBER</b>	<b>NAME OF SUPERVISOR / TITLE</b>
	<b>EMPLOYER ADDRESS</b>		<b>SALARY AMOUNT</b>

<b>OTHER SOURCE OF INCOME</b>		<b>AMOUNT</b>
<b>TOTAL GROSS INCOME</b>	<b>CHECK ONE</b>	
\$ _____	<input type="checkbox"/> Week	<input type="checkbox"/> Month <input type="checkbox"/> Year

NAME OF YOUR BANK	BRANCH OR ADDRESS	ACCOUNT NUMBER
		CHECKING
		SAVING

NAME OF CREDITOR	ADDRESS	PHONE NUMBER	MO. PAYMENT AMT.

IN CASE OF EMERGENCY, NOTIFY:	ADDRESS	PHONE	EMAIL	RELATIONSHIP
1.				
2.				
PERSONAL REFERENCES	ADDRESS	PHONE	LENGTH OF ACQUAINTANCE	OCCUPATION
1.				
2.				

Mother's maiden name: \_\_\_\_\_

Automobile: Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Automobile: Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Motorcycles (other vehicles) \_\_\_\_\_

Have you ever filed for bankruptcy? \_\_\_\_\_ When \_\_\_\_\_ Reason \_\_\_\_\_

Have you ever been evicted or asked to move? \_\_\_\_\_ When \_\_\_\_\_ Reason \_\_\_\_\_

*Applicant represents that all the above statements are true and correct and hereby authorizes verification of the above items including, but, not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request. All Applicants Must Supply: 1. Copy of Driver's License 2. Copy of Social Security Card 3. Copy of Payroll Stub or Tax Return. The screening and application fee is \$25 for each adult (anyone 18 years and older) who intend to reside at the property, regardless if applicant will or will not financially contribute towards rent. NO PERSONAL CHECKS. Application must be paid in cash or money order. The cost of the application fee is not a deposit or rent, and will not be applied to future rent or refunded, even if the application to rent is declined. Applicant(s) understand that the landlord may terminate any rental agreement entered into for any misrepresentation made above.*

PROPOSED MOVE IN DATE \_\_\_\_\_ APPLICATION FEE \$ \_\_\_\_\_ DEPOSIT \_\_\_\_\_

The undersigned makes application to rent housing accommodations designed as:

Apt. No. \_\_\_\_\_ located at \_\_\_\_\_ shown by \_\_\_\_\_

the rental for which \$ \_\_\_\_\_ per \_\_\_\_\_ and upon approval of this application agrees to sign a rental or lease agreement and pay all sums due (including deposits) before occupancy.

\_\_\_\_\_  
Date

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

### 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 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 advertising that indicates any preference, limitations, or discrimination in the rental or sale of housing.