

PACIFIC WEST MANAGEMENT

RENTAL APPLICATION

THE WINSTED AT SUNSET WEST 101 COPPERVALE CIRCLE ROCKLIN, CA 95765 916-789-1114 916-789-1117 (FAX)

APT # _____ MOVE IN DATE _____ LEASE TERM _____ RENT AMOUNT \$ _____

PERSONAL INFORMATION

NAME: _____ SSN: _____

BIRTH DATE: ____/____/____ D/L #: _____ STATE: _____

CURRENT ADDRESS: _____
STREET CITY STATE ZIP

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

CURRENT LANDLORD NAME: _____ PHONE #: _____

CURRENT RENT: \$ _____ MOVE IN DATE: _____ MOVE OUT DATE: _____

REASON FOR MOVING: _____

PLEASE LIST ANY ADDITIONAL PERSONS WHO WIL BE OCCUPYING THIS APARTMENT WITH YOU

NAME DATE OF BIRTH RELATIONSHIP

1. _____
2. _____
3. _____
4. _____

IF YOU HAVE PETS, PLEASE PROVIDE THE FOLLOWING INFORMATION

NAME AGE TYPE OF PET COLOR & DESCRIPTION CURRENT WEIGHT MAX WEIGHT

1. _____
2. _____

PLEASE LIST ALL AUTOMOBILES FOR ALL RESIDENTS

YEAR MAKE MODEL COLOR LICENSE PLATE # STATE

1. _____
2. _____
3. _____

PAST RESIDENCY

HAVE YOU EVER BEEN EVICTED? _____ IF YES, EXPLAIN: _____

PREVIOUS ADDRESS: _____
STREET CITY STATE ZIP

PREVIOUS LANDLORD NAME: _____ PHONE #: _____

PREVIOUS RENT: \$ _____ MOVE IN DATE: _____ MOVE OUT DATE: _____

REASON FOR MOVING: _____

EMPLOYMENT

CURRENT EMPLOYER: _____ PHONE #: _____

ADDRESS: _____
STREET CITY STATE ZIP

FROM: _____ TO: _____ JOB TITLE: _____ GROSS MONTHLY INCOME: \$ _____

PREVIOUS EMPLOYER: _____ PHONE #: _____

ADDRESS: _____
STREET CITY STATE ZIP

FROM: _____ TO: _____ JOB TITLE: _____ GROSS MONTHLY INCOME: \$ _____

PERSONAL REFERENCES

NAME: _____ RELATIONSHIP: _____ PHONE #: _____

NAME: _____ RELATIONSHIP: _____ PHONE #: _____

EMERGENCY CONTACT

NAME: _____ RELATIONSHIP: _____ PHONE #: _____

ALTERNATE PHONE #: _____

The applicant hereby represents that the above statements are true, and are made to induce the Landlord to rent him an apartment and the Landlord is authorized to investigate said statements. Any false statements made above shall be sufficient cause for Landlord to cancel and terminate any agreement made with the applicant. Owner or Agent has the right to reject this application and return the deposit, less \$ _____ for processing fee, within twenty one days from date of application. If applicant withdraws application, or fails to execute an Agreement upon request of Landlord, the deposit will be retained by Landlord as liquidated damages. Owner or Agent will request credit check, verify employment and obtain rental history prior to management reviewing file for approval.

APPLICANT SIGNATURE _____

DATE _____

AGENT/OWNER SIGNATURE _____

The Winsted Apartments
Resident Qualifying Criteria
(effective 3/17/05)

The Community will not discriminate against any person based on race, color, religion, sex, national origin, age, disability or familial status.

Occupancy Standard: Two persons per bedroom plus one. Ex: 2 bedroom = 5 persons.

Availability Policy: Apartments become available to pre-lease when the current resident submits a written notice to vacate.

Age Requirement: Leaseholder(s) must be 18 years of age or older. All occupants 18 years of age or older will be required to complete an application (even is living with parent, guardian, spouse or child).

Income Requirement: The gross monthly income of all leaseholders will be considered jointly and must equal 2.5 times the market rental amount on the apartment. All income must be verifiable with the last two pay check stubs.

Employment Verification: Leaseholder(s) must be able to provide verification of employment or the ability to pay the entire term of the lease.

Self-Employment: Must provide the previous year's personal income tax return and the previous two months personal bank statements as evidence of sufficient income. Persons who hold jobs that receive commission only, base salary plus commission, tips or bonuses will be considered self-employed.

Residency: Up to six months residency history will be reviewed and must exhibit no derogatory references. Any debt owed to an apartment community must be paid off and verified before an applicant can be approved.

Credit Requirements: The Winsted Apartments uses a scoring model to determine applicant credit suitability. Applications will fall into three categories: Approved, Approved With Conditions or Denied. Applications rated as Approved With Conditions will be subject to additional screening and/or security deposits in order to be accepted for residency.

Social Security Search: A Social Security Number Search will be performed on any applicant whose credit report reflects "no record found". Applicants with social security numbers determined to be fraudulent will be denied residency.

Animals: All animals are subject to management approval and community policy. The Winsted Apartments will allow up to two indoor pets per apartment. All pets must be 25 pounds or less. Monthly pet rent of \$20 per pet will be due along with a \$300 deposit for the first pet and a total of \$500 deposit for two pets. Deposits are considered to be additional security deposits and not exclusively pet deposits.

Application Fee: A \$30 non-refundable application fee is required per application.

Bankruptcy: If discharged will not result in automatic denial of application unless a housing department is included. Applicants will be required to show a "Schedule F".

Co-signer/Guarantor: A Co-signer/Guarantor and/or increased security deposit may be required in the case of applicants who are first-time renters. Guarantor's must be homeowners, have a gross monthly income of at least three times the monthly rent and their mortgage, and must meet all other qualifying criteria. The Guarantor must complete and sign the lease agreement. Only a relative or employer may guarantee the lease.

Resident

Date

Owner/Agent

Date