

# APPLICATION TO RENT OR LEASE

**APPLICANT** Each Applicant over the age of 18 must complete their own application form

**PLEASE PRINT**

First, Middle, Last Name	Date of Birth	Social Security #	Driver's License #
Other Names Used In the Last 10 Years	Home Phone	Work Phone	Cell Phone

**ADDITIONAL OCCUPANTS** List everyone, including children, who will live with you:

First, Middle, Last Name	Relationship To Applicant

**EMPLOYMENT**

	Current Employment	Prior Employment
Employer		
Address		
Employer Phone		
Job Title		
Name of Supervisor		
Dates of Employment	From:                      To:	From:                      To:
Income Per Month	\$	\$

**RESIDENCE**

	Current Residence	Previous Residence	Previous Residence
Street Address			
City			
State & Zip			
Dates of Stay			
Owner/Manager And Phone number			
Reason For Leaving			
Last Rent Paid	\$	\$	\$

**VEHICLES**

Automobiles	Make	Model	Color	Year	License No.
Motorcycles					

**PERSONAL REFERENCES**

In Case Of Emergency, Notify	Address/City	Phone	Relationship
Close Friend			
Nearest Relative Living Elsewhere			



"AOA Promotes Equal Housing Opportunity"

AOA Form No. 100A (Rev. 01-06) - Copyright 2006 - Apartment Owners Association of California ? www.aoausa.com

San Fernando Valley: (818) 988-9200 - Los Angeles: (323) 937-8811 - Long Beach: (562) 597-2422 - Garden Grove: (714) 539-6000 - ? San Diego: (619) 280-7007 - Northern California: (510) 769-7521

**CREDIT INFORMATION** Please list all your financial obligations

Name of Bank or Savings & Loan		Branch or Address		Account No.		Balance	
				Checking		\$	
				Savings		\$	
Credit Accounts	Account No.	Address/City		Phone	Balance	Due Monthly	

**GENERAL INFORMATION** Circle answer that applies

- Do you smoke? YES NO
- Do you have any pets? YES NO
- Have you ever filed for bankruptcy? YES NO
- Do you have any musical instruments? YES NO
- Do you have any water-filled furniture or do you intend to use water filled furniture in the apartment? YES NO
- Have you ever been convicted for selling, possessing, distributing or manufacturing illegal drugs or convicted of any other crime? YES NO
- Have you ever been evicted for non-payment of rent or any other reason? YES NO

Please explain any "yes" answers to the above questions:

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Why are you leaving your current residence? \_\_\_\_\_

The applicant hereby applies to rent/lease Apartment # \_\_\_\_\_ at \_\_\_\_\_ for \$ \_\_\_\_\_ per month, and upon owner's approval agrees to enter into a Rental Agreement and/or Lease and pay all rent and security deposits required before occupancy.

An application fee of \$ \_\_\_\_\_ is hereby submitted for the cost of processing this application, to obtain credit history and other background information.

**Applicant represents that all information given on this application is true and correct. Applicant hereby authorizes verification of all references and facts, including but not limited to current and previous landlords and employers, and personal references. Applicant hereby authorizes owner/agent to obtain Unlawful Detainer, Credit Reports, Telechecks, and/or criminal background reports. Applicant agrees to furnish additional credit and/or personal references upon request. Applicant understands that incomplete or incorrect information provided in the application may cause a delay in processing which may result in denial of tenancy. Applicant hereby waives any claim and releases from liability any person providing or obtaining said verification or additional information.**

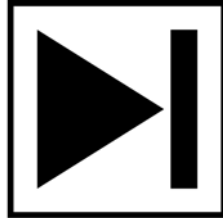
Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature required)



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NEXT GROUP

## Credit Card Charge Authorization

Name: \_\_\_\_\_

CC# \_\_\_\_\_

Exp: \_\_\_\_\_

Security Code \_\_\_\_\_

Billing Address \_\_\_\_\_

Amount:     \$ 30.00    

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Please fill out all pages and mail it back to  
**management@nextgroupla.com**

If you have any questions give us a call at  
**(310) 749-0591**