

# Venture Property Management

## APPLICATION TO RENT/LEASE NO PETS ALLOWED! EQUAL HOUSING OPPORTUNITY

Utility Company Called \_\_\_\_\_  
Spoke To \_\_\_\_\_  
Building Name \_\_\_\_\_  
Apartment No. \_\_\_\_\_  
Daytime Phone \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell # \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Soc. Sec. or Empl. No. \_\_\_\_\_ Driver's Lic. No. \_\_\_\_\_ & State \_\_\_\_\_ Exp. \_\_\_\_\_  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Soc. Sec. or Empl. No. \_\_\_\_\_ Driver's Lic. No. \_\_\_\_\_ & State \_\_\_\_\_ Exp. \_\_\_\_\_

OTHER PROPOSED OCCUPANTS	RELATIONSHIP	AGE	OCCUPATION

Number of people occupying apartment \_\_\_\_\_ Do you have any pets? (no pets allowed) \_\_\_\_\_  
How did you hear about us? \_\_\_\_\_ Do you have any liquid furniture? (i.e. waterbed) \_\_\_\_\_

Why are you vacating your present place of residence? \_\_\_\_\_

Give the following information as to your last three places of residence:

Address City State Zip	Rent Paid	Name of Owner or Mgr.	Mgr. Phone	From-To Date
Present	\$ _____			
Last prev.	\$ _____			
Other	\$ _____			

### Employment

Employer	Supvr. Name	Employed From - To Dates		
Address City State Zip	Phone	Position Held	Salary \$ _____ per _____	
Prev. Employer	Address City State Zip	Phone	From - To Dates	Salary \$ _____ per _____
Other Income: Amount \$ _____ Per _____	Sources			

### Employment, Spouse

Employer	Supvr. Name	Employed From - To Dates		
Address City State Zip	Phone	Position Held	Salary \$ _____ per _____	
Prev. Employer	Address City State Zip	Phone	From - To Dates	Salary \$ _____ per _____

### Credit References

Car Financed Through	Account No.
Name	Account No.
In case of emergency, call:	Address Phone

### Bank Accounts

Branch	City & State	Account No.
Checking		
Savings		

### Vehicles: How Many Vehicles Will You Keep At This Address

Vehicle 1	Make/Model	Year	Color	License No.	State
Vehicle 2	Make/Model	Year	Color	License No.	State
Vehicle 3	Make/Model	Year	Color	License No.	State

I authorize verification of any and all information contained herein. Information herein will be kept confidential and retained in my private file. I understand that any deposit given with this application is refundable only if this application is not accepted by the management office after investigation of references.

Application received by (Landlord) \_\_\_\_\_ Application Approved by (Landlord) \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Printed Name \_\_\_\_\_ Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Printed Name \_\_\_\_\_ Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

STANDARD RENTAL DEPOSITS (THIS IS NOT A RENTAL AGREEMENT)

No liquid furniture allowed, without written permission of landlord. Fish tanks with a maximum capacity of 40 gallons on ground floor only, with proof of insurance.

Monthly Rent \$ \_\_\_\_\_ Move-In Date \_\_\_\_\_ Apartment No. \_\_\_\_\_

Rent to Commence \_\_\_\_\_ and due the first day of each month. Lease Term \_\_\_\_\_ No. of Bedrooms \_\_\_\_\_

First month's rent in advance ..... \$ \_\_\_\_\_

Security Deposit ..... \$ \_\_\_\_\_

Extra Security Deposit ..... \$ \_\_\_\_\_

Credit check fee (non-refundable) ..... \$ \_\_\_\_\_

Other ..... \$ \_\_\_\_\_

Sub total ..... \$ \_\_\_\_\_

Less deposit paid with application ..... \$ \_\_\_\_\_

•BALANCE DUE at signing of agreement  
(M.O. OR CASHIER'S CHECK ONLY) ..... \$ \_\_\_\_\_

If application is not approved by lessor, or if possession of said premises cannot be delivered to applicant on the date specified, the sum so deposited (less credit check fee) shall be returned to applicant and applicant shall not acquire any right in or to said premises by reason thereof.

If applicant does not appear to claim the accommodations on move-in date, make all payments required, and complete any other agreed arrangements, the deposit is forfeited as liquidated damages and applicant waives all rights to occupancy. Landlord may immediately rent the accommodations to another party without notice to applicant.

**NOTICE:** PURSUANT TO CIVIL CODE, SECTION 1785.26, YOU ARE HEREBY NOTIFIED THAT A NEGATIVE CREDIT REPORT REFLECTING ON YOUR CREDIT RECORD MAY BE SUBMITTED IN THE FUTURE TO A CREDIT REPORTING AGENCY, IF YOU FAIL TO FULFILL THE TERMS OF YOUR RENTAL/CREDIT OBLIGATIONS IN ANY WAY. THIS IS THE ONLY NOTICE YOU WILL RECEIVE IN THIS REGARD.

**OWNER RECOMMENDS THAT RESIDENT SECURE INSURANCE TO PROTECT HIMSELF AND HIS PROPERTY.**

\*In the event an extra Security Deposit is required, the balance due amount will reflect the change.

\*\*UPON APPROVAL OF APPLICATION, THE FULL AMOUNT OF SECURITY DEPOSIT IS DUE IMMEDIATELY. \_\_\_\_\_

**IN THE EVENT OF DEFAULT OR CANCELLATION OF THIS OFFER BY APPLICANT AFTER ACCEPTANCE BY LESSOR, ALL DEPOSITS SHALL BE FORFEITED.**

This is an application for a one year lease unless otherwise stated on this form.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

By (Representative) \_\_\_\_\_ Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_