

## **Statement of Rental Policy**

We are glad you are interested in our rental property. For your convenience, we have prepared this overview of our guidelines used in processing all rental applications. Please feel free to ask any questions.

We are an equal opportunity housing provider: It is our policy to rent our units in full compliance with the Federal Fair Housing Act and all state and local fair housing laws. We do not discriminate against any person of race, color, ethnic background, religion, sex, age, marital or family status, physical disability or sexual orientation.

**Rental unit availability:** Rental units only become available when they are completely ready to rent, including cleaning, painting and the completion of all maintenance work and planned improvements. Rental unit availability can change as units become available during the day or are removed from the rental market based on rentals, cancellations or maintenance issues.

Valid photo identification and written authorization: You must be able to present a current photo identification such as a driver's license, military or state identification card or passport so that we can verify your identity. If your rental application is approved, we will require a photocopy of your identification at the time of your move-in to be kept in your tenant file. You must authorize us to verify all information provided in your rental application from credit sources, credit agencies, current and proper landlords and employers and personal references.

**Occupancy guidelines:** In compliance with all applicable fair-housing laws we have established restrictions on the total number of persons that may occupy a given rental unit. Our guidelines allow two persons per bedroom plus one additional person per rental unit. Occupancy will be limited to the persons indicated on the original rental application and lease only unless otherwise agreed in writing. Any proposed additional tenants must complete a rental application and be processed and approved through this same tenant-screening process prior to occupying the rental unit.

**Application Process:** All rental applications are evaluated in the same manner, and each applicant must voluntarily provide his or her social security number for us to obtain a consumer credit report. Every applicant must complete a separate rental application form and pay the non-refundable application fee of \$25 in advance. Any false or incomplete information will result in the denial of your application. If falsification of information is discovered after you are approved and have moved in, we reserve the right to terminate your tenancy. We will verify the information provided on each rental application through our own screening efforts and/or with the assistance of an independent tenant-screening firm. A credit report and employment and rental references for each and every applicant in a given rental unit will determine whether our rental criteria has been met.

## **Rental Criteria:**

**Income:** The total combined monthly gross income of all rental applicants in a given rental unit must be at least three times the monthly rental rate. Only verifiable income will count.

**Credit History:** You must be able to demonstrate financial responsibility. If you have any charge-offs, unpaid debts, a recent bankruptcy (within the last three years) or a pattern of delinquent payments, your application may be denied.

**Rental History:** Each rental applicant must be able to demonstrate a pattern of meeting their rental obligations, leaving prior rental properties in good condition and not having a pattern of complaints from neighbors. We will require satisfactory rental references from at least two prior landlords. If you have ever been evicted for any lease or rental violation your application may be denied.

**Criminal History:** If you have ever been convicted of (or pled guilty or no contest to) a felony or misdemeanor involving violence, sexual misconduct or honesty, your application may be denied.

## **Application to Rent**

Individual application required from each occupant 18 years of age or older, with all sections completed.

|   |          |                             | ·····            |                                   |                                       |  |  |  |  |
|---|----------|-----------------------------|------------------|-----------------------------------|---------------------------------------|--|--|--|--|
| Last Name   |          | First Name                  | Middle Name      | Social Security Number/TIN        |                                       |  |  |  |  |
| Date of Birth   |          | DL/Identification Number    | State Exp. Date  | Home Phone Number                 |                                       |  |  |  |  |
|   | · ·      |                             |                  |                                   |                                       |  |  |  |  |
| Cell Phone Number ( )   |          | Work Phone Number           | Email Address    |                                   |                                       |  |  |  |  |
| Present Add   | ress     | •                           | City             | State Zip                         |                                       |  |  |  |  |
|   |          |                             |                  |                                   |                                       |  |  |  |  |
| Date In   | Date Out | Owner/Manager Name          |                  | Owner/Manager Phone Number<br>( ) |                                       |  |  |  |  |
| Monthly Rent  |          | Reason for Moving           |                  |                                   |                                       |  |  |  |  |
| Previous Address  |          | City                        |                  | State Zip                         |                                       |  |  |  |  |
| Date In   | Date Out | Owner/Manager Name          |                  | Owner/Manager Phone Number ( )    |                                       |  |  |  |  |
| Monthly Rent  |          | Reason for Moving           |                  |                                   |                                       |  |  |  |  |
| D-1- + * *  |          |                             |                  | -                                 |                                       |  |  |  |  |
| Prior Address   |          |                             | City             | State Zip                         |                                       |  |  |  |  |
| Date In   | Date Out | Owner/Manager Name          |                  | Owner/Manager Phone Number ()     |                                       |  |  |  |  |
| Monthly Rent  |          | Reason for Moving           |                  |                                   |                                       |  |  |  |  |
| List All Proposed   |          | Name                        | DOB              | Name                              | DOB                                   |  |  |  |  |
| Occupants in  |          |                             |                  |                                   |                                       |  |  |  |  |
| Addition to Yourself  |          | Name                        | DOB              | Name                              | DOB                                   |  |  |  |  |
| Present Occupation  |          | Salary/Income wee<br>\$ mor |                  | Employer/Source of Income         |                                       |  |  |  |  |
| How long with this employer?  |          | Phone Number<br>( )         | Employer Address | Employer Address                  |                                       |  |  |  |  |
| Name of your supervisor   |          | Website                     | City             | City State Zip                    |                                       |  |  |  |  |
| Prior Occupation  |          | Salary/Income wee<br>\$ mon |                  | Employer/Source of Income         |                                       |  |  |  |  |
| How long with this employer?  |          | Phone Number ()             | Employer Address |                                   |                                       |  |  |  |  |
| Name of your supervisor   |          | Website                     | City             | State Zip                         | · · · · · · · · · · · · · · · · · · · |  |  |  |  |
|   |          |                             |                  |                                   |                                       |  |  |  |  |
| Applicant represents that the statements above and on the reverse of this form are true and correct and hereby authorizes verification of items including, but not limited to the obtaining of tenancy and credit reports and agrees to furnish additional credit references or other information upon request. Applicant certifies under penalty of perjury that the foregoing is true and correct, and authorizes owner or his agents to obtain applicant's tenancy, credit and criminal history reports, and further authorizes owner and his agents to investigate the information provided herein, and to make further inquiry and review as necessary. Applicant acknowledges that owner shall rely on the information provided herein, and that any material misstatement will at owner's option be a material and non-curable breach of any subsequent rental agreement and grounds for immediate eviction. Applicant is applying for the premises located atUnit # |          |                             |                  |                                   |                                       |  |  |  |  |
| City, State, Zip Owner/Manager  |          |                             |                  |                                   |                                       |  |  |  |  |
| Date Applicant  |          |                             |                  |                                   |                                       |  |  |  |  |
| Form Provided by the Apartment Association of Orange County   |          |                             |                  |                                   |                                       |  |  |  |  |
| To Order Forms Visit our Website at www.aaoc.com  |          |                             |                  |                                   |                                       |  |  |  |  |



| Account Number   |                   | Name of Your Bank |              | Branch or Address |              |  |  |  |
|--|-------------------|-------------------|--------------|-------------------|--------------|--|--|--|
| Checking   |                   |                   |              |                   |              |  |  |  |
|  |                   |                   |              |                   |              |  |  |  |
| Savings  |                   |                   |              |                   |              |  |  |  |
|  |                   |                   |              |                   |              |  |  |  |
| Name of Creditor   | Address           |                   | Phone Number |                   | Mo. Pmt. Amt |  |  |  |
| 1.   |                   |                   | ( )          |                   | \$           |  |  |  |
| 2.   |                   |                   | ( )          |                   | s            |  |  |  |
| In case of emergency, notify Relationship  |                   |                   |              |                   |              |  |  |  |
| Address  | City              | State             | Zip Code     | Phone Number      | <u> </u>     |  |  |  |
|  |                   |                   | •            | ( )               |              |  |  |  |
| Personal References  |                   |                   |              | Phone Number      |              |  |  |  |
| 1.   |                   |                   |              | ( )               |              |  |  |  |
|  |                   |                   |              |                   |              |  |  |  |
| Address  |                   | City              | State        | Zip               |              |  |  |  |
| 2.   |                   |                   |              | ()                |              |  |  |  |
|  |                   |                   |              |                   |              |  |  |  |
| Address  |                   | City              | State        | Zip               |              |  |  |  |
| 3.   |                   |                   |              | ( )               |              |  |  |  |
|  |                   |                   |              | ,                 |              |  |  |  |
| Address  | N                 | City              | State        | Zip               |              |  |  |  |
|  |                   |                   |              |                   |              |  |  |  |
| Do you or any proposed occurs  |                   | No                |              |                   |              |  |  |  |
| Do you or any proposed occupa<br>Have you ever been party to a l   |                   |                   |              |                   |              |  |  |  |
| Liquid filled furniture?   | lawsuit? Describe | e:                |              |                   |              |  |  |  |
| Liquid filled furniture? Describe:<br>Have you ever filed bankruptcy? Describe:  |                   |                   |              |                   |              |  |  |  |
| Will you have pets? Des  |                   |                   |              |                   |              |  |  |  |
| Have you ever been evicted or  |                   | Describe:         |              |                   |              |  |  |  |
|  |                   |                   | ibe:         |                   |              |  |  |  |
| Have you ever been convicted of a crime against persons or property?       Describe:         Have you ever used other names?       If so, list   |                   |                   |              |                   |              |  |  |  |
|  |                   |                   |              |                   |              |  |  |  |
| Automobile:  |                   |                   |              |                   |              |  |  |  |
| Make   | Model             | Year              | License No   | )                 | State        |  |  |  |
| Automobile:  |                   |                   |              |                   |              |  |  |  |
|  | Model             | Vear              | License No   |                   | State        |  |  |  |
|  |                   |                   |              |                   | State        |  |  |  |
| Applicant represents that the statements above and on the reverse of this form are true and correct and hereby authorizes verification of items including, but not limited to the obtaining of tenancy and credit reports and agrees to furnish additional credit references or other information upon request. Applicant certifies under penalty of perjury that the foregoing is true and correct, and authorizes owner or his agents to obtain applicant's tenancy, credit and criminal history reports, and further authorizes owner and his agents to investigate the information provided herein, and to make further inquiry and review as necessary. Applicant acknowledges that owner shall rely on the information provided herein, and that any material misstatement will at owner's option be a material and non-curable breach of any subsequent rental agreement and grounds for immediate eviction. Date Applicant Applicant Applicant |                   |                   |              |                   |              |  |  |  |



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