

\*Income Requirement is 2.5 to 3 times the rent amount.

Requirements to process an application:

- \* An application **MUST** be completely filled out for anyone over the age of 18
- \* Application fee of \$30 per application is due at the time of turn in
- \* Please provide a color copy of valid ID or drivers license
- \* Provide copies of social security card, foreign government/consulate ID, or TIN card
- \* Provide 3 months proof of income ( paystubs, ssi, ihss, edd, etc)
- \* If self employed or 1099 employee please provide previous 2 years of tax returns
- \* IF APPLICABLE - Provide RFTA voucher with %30 figure from HOUSING AUTHORITY
- \*(If more than one adult) List of approved household members from your resident portal



7600 N Ingram Ave #105

Fresno, Ca 93711

Telephone 559-435-4040

Fax 559-435-3992

Monday thru Friday 9am-5pm

www.Realtyfresno.com

APPLICATION FEE CAN BE PAID BY CASH (EXACT CHANGE) OR MONEY ORDER

## APPLICATION TO RENT

LAST NAME		FIRST NAME		MIDDLE		SOCIAL SECURITY OR TIN #	
OTHER NAMES USED IN THE LAST 10 YEARS						PRIMARY PHONE NUMBER	
DATE OF BIRTH		EMAIL				SECONDARY PHONE NUMBER	
DRIVERS LICENSE NUMBER		EXPIRATION		STATE		OTHER ID'S	
1 PRESENT ADDRESS		CITY		STATE		ZIP CODE	
DATE IN		DATE OUT		OWNER/AGENT NAME		OWNER/AGENT PHONE NO.	
REASON FOR MOVING				MANAGEMENTS FAX NUMBER			
2 PREVIOUS ADDRESS		CITY		STATE		ZIP CODE	
DATE IN		DATE OUT		OWNER/AGENT NAME		OWNER/AGENT PHONE NO.	
REASON FOR MOVING				MANAGEMENTS FAX NUMBER			

LIST ALL PEOPLE WHO WILL BE LIVING IN THE RENTAL	NAME	AGE	NAME	AGE
Will you have any animals?		Describe : size, weight, breed		

A	Employer	Length of employment
	Address	City State Zip
	Supervisor	telephone
B	Prior occupation	Employer name
	How long with this employer	Employer address
	Supervisor's Phone #	

LIST OTHER SOURCES OF INCOME AND VALUE : SSI, SSA, PENSION, CASH AID, FOOD STAMPS,	30% NUMBER
IF YOU HAVE SECTION 8 MARK THIS BOX <input type="checkbox"/>	

Current gross income	Check One
\$ PER	<input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year

\*IF SELF EMPLOYED PLEASE PROVIDE THE FOLLOWING 2 YEARS OF TAX DOCUMENTS



California Apartment Association Approved Form

www.caanet.org

Form 3.0 -- Revised 1/05 -- ©

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Page 1 of 2



YOU MUST PROVIDE A MINIMUM OF TWO EMERGENCY CONTACTS

In case of emergency, notify:	Address	Phone	City	Relationship

Personal References:	Address	Phone	Length of Acquaintance	Occupation
1.				

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

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

Have you ever filed for bankruptcy? \_\_\_\_\_ Have you ever been evicted or asked to move? \_\_\_\_\_

Have you ever been convicted of selling, distributing or manufacturing illegal drugs? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

\*\*\*\*\*

WERE YOU REFERRED TO REALTY FRESNO BY AN EXISTING TENANT? ☐ YES ☐ NO. If yes please fill out the section below.

Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_

\*\*\*\*\*

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. Applicant consents to allow Owner/Agent to disclose tenancy information to previous or subsequent Owners/Agents.

Owner/Agent will require a payment of \$ 30.00 , which is to be used to screen Applicant with respect to credit history and other background information. The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports \$ 20.00
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) \$ 10.00

Address of location applying for : \_\_\_\_\_ Apt# \_\_\_\_\_

\*CREDIT CHECK FEE IS A DIRECT COST OF THE APPLICATION PROCESS AND IS NO WAY REFUNDABLE UNDER ANY CIRCUMSTANCES. A COPY OF THE CREDIT REPORT MAY BE GIVEN UPON REQUEST FROM THE APPLICANT

\*\*DENIABLE CONDITIONS CAN BE BUT NOT LIMITED TO EVICTIONS, UNLAWFUL DETAINERS, POOR RENTAL HISTORY, PGE AND UTILITY COLLECTIONS

DATE \_\_\_\_\_ 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 all 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 advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.

