

Barbera Management Inc.
P.O Box 1019 Temple City CA 91780 / FAX 626 359 5286 Office: 626-359-4995 x100
(ALL SECTIONS OF APPLICATION MUST BE COMPLETED)

Property Address _____ City _____ State _____

The apartment rental rate _____ Deposit _____

Lease from ____/____/____ to ____/____/____. Attached is a \$30 CASH credit fee, non-refundable.

Occupancy Limits: Studios – 1 Person, 1Bdrm - 2 People, Maximum 2 People per Bedroom.

How were you referred to us? (Please circle) BMI Sign, Westside Rentals, Craigslist, Agent, Other

Full Name: _____ DOB: ____/____/____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Social Security No. ____/____/____. DL No. _____ Email: _____

Additional tenants: APPLICATION REQUIRED FOR EACH ADULT

Name: _____ **Relationship:** _____

Name: _____ **Relationship:** _____

Name: _____ **Relationship:** _____

Rental History

Current Address: _____

Dates Lived at Address: From: _____ To: _____ Reason for leaving: _____

Landlord/Manager: _____ Landlord/Manager Phone: _____

Prior Address: _____

Dates Lived at Address: From: _____ To: _____ Reason for leaving: _____

Landlord/Manager: _____ Landlord/Manager Phone: _____

Employment History

Name and Address of Current Employer: _____

Dates Employed: From: _____ To: _____ Title/Position _____

Name of Supervisor: _____ Supervisor's Phone: _____

Name and Address of Previous Employer: _____

Dates Employed: From: _____ To: _____ Title/Position _____

Name of Supervisor: _____ Supervisor's Phone: _____

Income

Gross Monthly Employment Income (before deductions) \$ _____

Average Monthly Amounts of Other Income: \$ _____

Credit and Financial Information – Copies of 3 Most recent Bank Statements or Pay Stubs Required

Name of Your Bank(s)	Account No.	Approx. Balance
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____

Names of Your Creditors:	Telephone	Account Number	Monthly Payments
1. _____	(____) _____	_____	_____
2. _____	(____) _____	_____	_____
3. _____	(____) _____	_____	_____
4. _____	(____) _____	_____	_____
5. _____	(____) _____	_____	_____

General Information:

Have you ever filed Bankruptcy, had Liens, Judgments or Pending Law Suits? No _____ Yes _____

If yes, explain when and the circumstances _____

Have you ever been convicted? No _____ Yes _____ If Yes, case number _____

If yes, explain _____

Have you ever been evicted or asked to move? No _____ Yes _____

If yes, explain when and the circumstances _____

FOR EMERGENCY PLEASE NOTIFY THE FOLLOWING: 1. PERSONAL REFERENCE AND 2. RELATIVE

Name	Telephone	Relationship	Address
1. _____	(____) _____	_____	_____
2. _____	(____) _____	_____	_____
3. _____	(____) _____	_____	_____

Automobile Make	Model	Year	Color	License Number
_____	_____	_____	_____	_____
Automobile Make	Model	Year	Color	License Number
_____	_____	_____	_____	_____

What persuaded you to apply for this apartment? _____

I certify that all the information given above is true and correct and understand that my lease or rental agreement may be terminated if I have made any material false or incomplete statements in this application. I authorized verification of the information in this application from my credit sources, credit bureaus, current and previous landlords and employers, and personal references. I understand that if I have initiated a "security freeze" on my credit information with any of the credit reporting agencies, I will promptly lift the freeze for a reasonable time so that my credit report may be accessed by the Landlord/Manager, and I understand that if I fail to do so, the Landlord/Manager may consider this an incomplete application. (CC 1785.11.2.) This permission will survive the expiration of my tenancy.

Print Name _____

Applicant Signature _____

Manager Signature _____