

# RENTAL APPLICATION FOR MARRIED COUPLES

Neatly complete all information below. All other applicants over the age of 18 must complete and sign their own application.

Applicants full name \_\_\_\_\_ Phone# \_\_\_\_\_ D.O.B. \_\_\_/\_\_\_/\_\_\_

Social Security # \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_ Exp. \_\_\_\_\_

Current Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Current Landlords Name \_\_\_\_\_ Landlords Phone # \_\_\_\_\_

How long at this address \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Previous Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Previous Landlords Name \_\_\_\_\_ Landlords Phone # \_\_\_\_\_

How long at this address \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Auto Yr \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License Plate #/State \_\_\_\_\_

Present Employer \_\_\_\_\_ Position \_\_\_\_\_ Monthly Income\$ \_\_\_\_\_

Employers Address \_\_\_\_\_ City/State \_\_\_\_\_

Phone# \_\_\_\_\_ How long at this job \_\_\_\_\_ Other Income/Source \_\_\_\_\_

Co-Applicants full name \_\_\_\_\_ Phone# \_\_\_\_\_ D.O.B. \_\_\_/\_\_\_/\_\_\_

Social Security # \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_ Exp. \_\_\_\_\_

Auto Yr \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License Plate #/State \_\_\_\_\_

Present Employer \_\_\_\_\_ Position \_\_\_\_\_ Monthly Income\$ \_\_\_\_\_

Employers Address \_\_\_\_\_ City/State \_\_\_\_\_

Phone# \_\_\_\_\_ How long at this job \_\_\_\_\_ Other Income/Source \_\_\_\_\_

Number and type of pets \_\_\_\_\_ Have either of you been party to an unlawful detainer action? [ ] Yes [ ] No

Total Number of adults \_\_\_\_\_ Total Number of children living with you under the age of 18 \_\_\_\_\_

Names and relations of all other applicants \_\_\_\_\_

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at a tenant decision. I understand that the landlord may terminate any rental agreement entered into for any misrepresentation made above.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Co-applicant \_\_\_\_\_ Date \_\_\_\_\_

Received from applicant(s) the non-refundable sum of \$ \_\_\_\_\_ dollars to pay for a tenant screening services from C.C.B. Inc.

Coastal Credit Bureau www.coastalcredit.com Phone 626 577 8088 Fax 626 577-8665

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