

TENANT LONG TERM RENTAL APPLICATION

APPLICATION FEE \$40.00 EACH (CASH ONLY)

				Office Us	e Only			
Social Security # Verified:	Ş	Credit Repor Processed by		Preferred Mo Date:	ove-In	F	Received \$40 Pr	cocessing Fee: 🦻
Driver's License Verified:	Ç.	Processed Or	:	Property:				
<u>Neatly con</u>	ıplete	all information	on below. All app	licants over th	e age of 18 m	ust complete an	nd sign their ow	n application.
APPLICANTS F	ULL I	NAME:						
Phone #					EMA	IL:		
Current Mailing A	Addre	ss:		City			State	Zip
Social Security #			Dri	Drivers License #			State	Exp
Current Address				City			State	Zip
Current Landlord	's Nai	me				Landlord's F	Phone #	
Dates @ Address	From	:	_To:	Reason for	r leaving (deta	ails):		
Previous Address					City		State	Zip
Previous Landlor	d's Na	ame				Phone #		
Dates @ Address	From	:	_To:	Reason for	leaving:			
Auto YrN	lake_		Model		State	License Plate	e #	
PRESENT EMPO	OYER	L			Position		Mo. Incor	me \$
Phone #Dates @ j			_Dates @ job Fro	n:To: Other income/source _		ome/source		
Employer's Addre	ess					City		State
PREVIOUS EMPLOYER				_Position	Mo. Income \$		\$	
Phone #Dates @ j		_Dates @ job Fro	m:	_To:	Other inc	ome/source \$		
Past Employer's A	Addre	SS				City		State
PREVIOUS EMP	OYE	R	I	Position		Mo. Inc	ome\$	



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Have you ever been party to an eviction? []	Yes [] No Number	r of Pet(s) Type of Pet(s)	
Personal References: Other than living with y	<i>201</i>		
Name	Yrs. Known	_Relationship	_Phone #
Name	Yrs. Known	_Relationship	Phone #
Name	Yrs. Known	_Relationship	_Phone #
Total number of adultsTotal numb	er of children living v	vith you under the age of 18	_
Names and relations of all other occupants. P	Please include <u>current</u>	phone#'s:	
Name	Relationship	Phone Number (cell/v	vork)
a)			
b)			
c)			

I certify the above information is correct and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I understand that giving incomplete or false information is grounds for rejection of the application. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I have reviewed and read the Owner/Agent's rental criteria.

Applicant S	Signature:
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Print Name:

Date:



TO:	
FAX:	
FROM:	

TENANT LONG TERM RENTAL REFERENCE ***APPLICANT – PLEASE SIGN BOTTOM OF FORM ONLY***

Please provide information on the following	g person:				
Resident Name:	Current Resident?				
Address:	Move In Date:				
	Approximate Move Out Date:				
		Yes	No		
Was the resident on a written rental agreement?		9	9		
Was proper notice given?		5	5		
Any documented damages? If yes, explain:		Ţ	5		
Has the resident paid all monies owed? If not, ple Rent:	ase list amount owed: Damages: Other:	7	9		
Did resident have any NSF checks? If yes, how n	8	Ş	Ţ		
Did the resident have any 3 day notices to rent or tenancy?	quit? If yes, how many in the last year of	(j)	7		
Did the renter comply with their rental agreement	9	Ţ			
Did you ask the tenant to vacate the unit? If yes, p	<]	Ţ			
Would you re-rent to the resident?		Ţ	Ţ		
Additional Comments:					
Your Name:	Your Position:				

PLEASE RETURN FAX TO TAHOE RENTAL CONNECTION AT 530-542-2906 Phone us if you have any questions at 800-542-2100 or 530-542-2777

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