

# **Rental Application**

Name:		
Address Applied For:		Unit #:
For Property Information:	Kathy - (559) 221-3151	www.rentpms.com
For Application Questions:	Cynthia – (559) 224-2930	
Office Address: 1100 W S	haw Ave #114, Fresno CA 93	3711 (Palm & Shaw)
To Apply:		
Email the following to: Cyn	thia@rentpms.com	
	•	ve employee name pre-printed
Pay \$35 processing fee (per	*	om/tenants/tenant-application bit or PayPal accepted)
By signing I certify that I have rea	d the attached "Minimum Criter	ria and Additional Terms".
Applicant Signature	Date	





#### MINIMUM CRITERIA FOR RESIDENT SELECTION

- Able to provide government issued photo ID
- Has a verifiable source of income
- Income minus expenses is a minimum of 1½ times the rent (2½ 3 times for houses)
- 12 months of good rental history
- If self employed, can provide proof of income for the past 12 months
- Able to pass the "credit check"

### Any of the following items found in the screening process will result in disqualification:

- o Unlawful Detainer Action (Eviction)
- o Owing any property owner, manager or apartment complex

#### Because of insurance limitations, the following types of dogs are not allowed:

- o Akita
- o Doberman Pinscher
- o Rottweiler
- o Chow
- o German Shepherd
- o Wolf Hybrid
- Presa Canario
- o All Pit Bull breeds including Bull Terrier & Staffordshire Terrier

#### ADDITONAL TERMS

- All rentals are a one (1) year lease unless specified otherwise in writing.
- No pets unless approved. An additional deposit will be required.
- Dogs under 1 year in age will not be allowed.
- We will PROCESS your application, but it may not be APPROVED until the unit is available.
- We may accept other applications and process them until the unit is available.
- The most qualified applicant will be approved. NOT first come, first served.
- Until you pay your deposit, the property will not be held for you.
- Deposit must be a money order or cashier's check.
- After the deposit is paid, you must sign a lease within 14 days.



☐Tenant	
☐Guarantor	

Name of Applicant:	

## **APPLICATION TO RENT**

## (All sections must be completed)

Individual applications required from each occupant 18 years of age or older.

PART 1 - P	ERSON	IAL INF	ORMATIC	N & ADI	DRESS HISTO	RY		C &	可以的思想是在	
Last Name	-	First Name		Middle Name		SS	6N or ITIN			
Other names used in the last 10 yrs.		Work phone number		Hc (	Home phone number					
Date of birth			E-mail ad	dress				Mc	bbile/Cell phone	number
Photo ID/Ty	pe	Number		Issuing Gov.		Exp. da	te	Other ID		
Present add	iress	-			City		State		Zip	
Date in		Date out		Landlord	Name				Landlord phone	number
Reason for moving out					Cur \$	rent rent	/Month			
Previous ad	dress				City		State		Zip	
Date in		Date out		Landlord	Name				Landlord phone	number
Reason for n	noving	out						Rei \$	nt at move-out	/Month
Next previou	us addı	ess			City		State	·	Zip	, world
Date in		Date out		Landlord	Name				Landlord phone	number
Reason for m	noving o	out						Rer \$	nt at move-out	/Month
Proposed Occupants:	Nam	е				Name	)			
List all Nar		9			ū	Name				
o yourself Name			Name							

☐Tenant	
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CO. commenters	
☐Guarantor	

Name of Applicant:	

PART 2 - INCOME					
Income from Employment (If no income is recei	ived from emplo	yment, write N/A)			
Current Employer Name		itle or Position	Dates of Employment		
Employer address		Employer/Human Resources phone number			
City, State, Zip		supervisor/human	resources manager		
Current gross employment income amount:		(check one) Per □ Week □ Month □ Year			
Prior Employer Name		tle or Position	Dates of Employment		
Employer address		Employer/Human Resources phone number			
City, State, Zip		Name of supervisor/human resources manager			
Income from Other Sources					
Other income source	Amount \$	Frequenc	У		
Other income source	Amount \$	Frequenc	у		

PART 3 – ASSETS & LIABILITIES				
Name of your bank	Branch or address	Account Number	Type of Acct	
XXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXX	XXXXX	
XXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXX	XXXXX	

Please list ALL of your financial obligations below.					
Name of Creditor	Address	Phone Number	Monthly Pmt. Amount		
XXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXX	XXXXXX		
XXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXX	XXXXXXX		
XXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXX	XXXXXXX		
XXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXX	XXXXXXX		
XXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	XXXXXXXX	XXXXXXX		





☐Tenant ☐Guarantor	Name of A	Name of Applicant:			
PART 4 - EMERGENCY	ONTACT(S)	S. T. S.		<b>企</b> 数 而 <b>对</b> 值	
In case of emergency, notify:	r =	Address: Street, City, State, Zip		Phone	
1.					
2.					
PART 5 - REFERENCES	SALES SECTION OF SECTI				
Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone	
1.	z.ip	Acquaintance			
2.					
Vehicles					
Automobile #1	Make: Year:	Model: License #:			
Automobile #2	Make:	Model:			
Automobile #2	Year:	License #:			
Other motor vehicles (list all):					
Other Information				3.0000	
Have you ever filed for ban If yes, explain:	kruptcy? □ No □ Yes				
Have you ever been evicted If yes, explain:	d or asked to move?  No Yes				
Do you have pets? ☐ No ☐ If yes, describe:	J Yes				
Do you have a waterbed? If yes, describe:	□ No □ Yes				
How did you hear about this	rental?				







☐Tenant ☐Guarantor	Name of Applicant:
PART 7 - ICRAA NOTICE	CONTRACTOR OF THE STREET
NOTICE REGARDING CALIFORNIA INVESTIGATIVE CON-	SUMER REPORTING AGENCIES ACT
☐ Landlord does <u>not</u> intend to request an investigative consumer rep	port regarding the Applicant
Unless the box above is checked, Landlord intends to request an inverse Applicant's character, general reputation, personal characteristics, and California Civil Code, the files maintained on you by the investigative you during business hours and on reasonable notice, provided you fur may appear at the investigative consumer reporting agency identified request for copies to be sent by certified mail to a specified addressed summary of the file to be provided over the telephone. The agency may duplication costs, if you request a copy of your file. The agency is recovered to you, and the agency must explain to you any coded inform person, a person of your choice may accompany you, provided that the are accompanied by a person of your choosing, the agency may require permission to the investigative consumer reporting agency to discuss agency that will prepare the report(s) identified in this section is listed.	and mode of living. Under Section 1786.22 of the consumer agency shall be made available to smish proper identification, as follows: (1) You below in person, (2) you may make a written e, or (3) you may make a written request for a ay charge a fee, not to exceed the actual quired to have personnel available to explain nation appearing in your file. If you appear in his person furnishes proper identification. If you ire you to furnish a written statement granting your file in the other person's presence. The

Fresno County Public Records

Trans Union Credit Reporting Agency

Name of Agency

1100 Van Ness Ave. Fresno CA 93724 P.O. Box 2000, Chester, PA 19016 Address of Agency

If you would like a copy of the report(s) that is/are prepared, please check the box below:

☐ I would like to receive a copy of the report(s) that is/are prepared

If the box above is checked, Landlord agrees to send the report to Applicant within three (3) business days of the date the report is provided to Landlord. Landlord may contract with another entity to send a copy of the report.





□Tenant □Guarantor	Name of Applicant:
PART 8 – CONSIDERATION OF CREDIT HISTORY Important Information, read carefully:  Under California law, applicants with a government rent sproviding lawful, verifiable alternative evidence of the apple paid by the tenant, including, but not limited to, govern statements.  If an eligible applicant elects to submit such alternative en	olicant's reasonable ability to pay the portion of the rent to nment benefit payments, pay records, and bank
instead of the applicant's credit history.  Option 1: Consideration of Credit History	Option 2: Alternative Evidence of Ability to Pay (This option is ONLY available to government rent subsidy recipients)
If you either:  Do NOT have a government rent subsidy OR  Do have a government rent subsidy but are not choosing to submit alternative evidence of your ability to pay rent to be considered instead of credit history	If you both:  DO have a government rent subsidy AND  Are choosing to submit alternative evidence of your ability to pay rent to be considered instead of your credit history  Read and initial below.
Read and initial below.  Applicant authorizes the Landlord to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number	Applicant authorizes the Landlord to obtain reports othe than credit reports, such reports may include unlawful detainer (eviction) reports, social security number verification, fraud warnings, previous tenant history and employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or

subsequent Landlords.

Applicant's Initials:

the ability to pay.

By signing below, Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agrees to furnish additional references upon request.





verification, fraud warnings, previous tenant history and

employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or

subsequent Landlords.

Applicant's Initials:

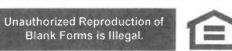
Application will not be considered complete until

Applicant submits their verifiable alternative evidence of

☐Tenant ☐Guarantor	Name of Applicant:
	eening Fee Disclosure and Itemization
Landlord will require payment of a fee, which is to be used follows:	to screen Applicant. The total amount of the fee is as
Total fee for applications subject to credit history review  (Applicable for Applicants who selected Option 1 in Part 8 of this Application)	Total fee for applications subject to review of alternative evidence of ability to pay (Applicable for Applicants who selected Option 2 in Part 8 of this Application)
\$35.00	\$35.00
The amount charged is itemized as follows:  1. Actual cost of credit report, unlawful detainer (evictor)	tion) search, and/or other screening reports, as applicable
Actual cost for screening reports inclusive of credit history  (Applicable for Applicants who selected Option 1 in Part 8 of this Application)	Actual cost for screening reports NOT including credit history (Applicable for Applicants who selected Option 2 in Part 8 of this Application)
\$15.00	\$15.00
2. Cost to obtain, process and verify screening information \$_\$35.00  THE VINE AND CONTROL OF THE PROPERTY OF	
Option to receive receipt by email. ② (Landlord check or receive a receipt by email. If you would like to have your receive you, please provide your email address here:	
(	(Applicant fill in email address, if electing email receipt)
f the box is not checked, or if you do not provide a valid emaddress listed in Part 1 of this Application, or provided perso	



Date



Applicant (signature required)

□Tenant	Name of Applicant:
□Guarantor	

#### 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.





#### NOTICE TO PROSPECTIVE RESIDENTS OF FRESNO'S NON-SMOKING ORDINANCE

Notice of Applicability of Ordinance Prohibiting Smoking In and Around Multiunit Rental Properties. As required by Section 10-2004(b) of the Fresno Municipal Code, prospective residents are hereby notified that this rental property is subject to Article XX of Chapter 10 of the Fresno Municipal Code (hereinafter "Ordinance"), which prohibits smoking in and around multiunit rental properties.

City of Fresno Advisory Regarding Ordinance. The following advisory regarding the Ordinance was prepared by the City of Fresno:

"As of January 1, 2022, smoking is prohibited in all units, common areas, and outdoor areas, except for specifically designated smoking areas.

On October 14, 2021, the Fresno City Council passed Ordinance 2021-045 prohibiting smoking in all multi-unit rental properties in Fresno (Ordinance). The Ordinance will go into effect on January 1, 2022.

According to section 10-2004(a)-(b) of the Ordinance, all existing tenants must receive a written notice of the Ordinance no later than January 1, 2022. All new leases initiated after January 1, 2022, will include non-smoking provisions. Please note the new law prohibits smoking in all units and common areas, excluding any exclusive use outdoor areas, regardless of whether it is included in the lease, and violators of the law may be subject to a fine.

Under the smoke-free ordinance, "Multi-unit residence" means residential property containing two or more rental units where the majority of the units share at least one common wall with an adjacent unit. "Smoking" means inhaling, exhaling, or burning any tobacco, nicotine, or marijuana, or plant product, whether natural or synthetic, intended for inhalation, or using an "electronic smoking device." "Exclusive Use Outdoor Area" means an area accessible only by the occupant of a unit, such as a private balcony, deck, porch, or patio. For additional provisions, see attached Ordinance.

The U.S. Surgeon General's find that there is no safe level of exposure to secondhand smoke and the California Air Resources Board's decision to classify secondhand smoke as a toxic air contaminant has prompted jurisdictions across the state and country to reduce multi-unit residents' exposure to secondhand smoke."

More Restrictive Smoking Policy in Rental/Lease Agreement Controls. The Ordinance does not affect or prohibit the implementation or enforcement a more restrictive smoking policy than set forth in the Ordinance. Therefore, you are notified that the landlord may have a stricter non-smoking policy than the Ordinance requires, and if so, the stricter non-smoking policy controls.



