

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	nthia@rentpms.com		
 Picture ID (Government) Proof of income for the One application for each 		ve employee name pre-printed	
Pay \$35 processing fee (per		om/tenants/tenant-application ebit or PayPal accepted)	
By signing I certify that I have rea	d the attached "Minimum Crite	ria and Additional Terms".	
Applicant Signature	Date	A)	





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)
- Owing any property owner, manager or apartment complex

ADDITONAL TERMS

- All rentals are a one (1) year lease unless specified otherwise in writing.
- No pets unless approved.
- 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 Applie	cant:			

APPLICATION TO RENT

All sections must be completed. Individual applications are required from each occupant 18 years of age or older, unless instructed otherwise by Landlord. If any occupant over the age of 18 is <u>not</u> intended to be a signatory to the Rental/Lease Agreement, please contact Landlord regarding their policy prior to completing this Application.

		ble)		oplying to rent the					
PART 1 - P	ERSO	NAL INFORMA	TION & AD	DRESS HISTOR	RY	7 44 4	78/		
Last Name		First	Name	Mic	ddie Nan	ne	SS	N or ITIN	
Other name	s used	in the last 10 yr	s.	Work phone no	umber		Ho	me phone numb	per
Date of birth	1	E-mail	address				Mc	bile/Cell phone	number
Photo ID/Ty	pe	Number		Issuing Gov.		Exp. dat	е	Other ID	
Present add	dress			City		State		Zip	
Date in		Date out	Landlo	rd Name				Landlord phone	number
Reason for r	moving	out				9	Cur	rent rent	/Month
Previous ad	Idress			City		State		Zip	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Date in		Date out	Landlor	d Name				Landlord phone	number
Reason for n	noving	out					Rer	nt at move-out	/Month
Next previou	us add	ress		City		State		Zip	AMOREI
Date in		Date out	Landlor	d Name				Landlord phone	number
Reason for m	noving	out				F		t at move-out	/Month
PART 1 - PE	RSON	AL INFORMAT	ION & ADI	DRESS HISTOR	Y (CONT	INUED)			
Proposed Decupants:	Nam				Name				
List all Nar		е			Name				
o yourself	Nam	е			Name				
	Nam	е			Name				





☐Tenant☐Guarantor☐

Name of Applicant:		

PART 2 – INCOME						
Income from Employment (If no income i	is received from e	mployment, write N/A)	的社员 医多足术			
Current Employer Name	J	Job Title or Position	Dates of Employment			
Employer address	E	Employer/Human Resources phone number				
City, State, Zip	Nar	me of supervisor/human	resources manager			
Current gross employment income amount: \$		eck one)	/ear			
Prior Employer Name	J	ob Title or Position	Dates of Employment			
Employer address	E	Employer/Human Resources phone number				
City, State, Zip	Nan	Name of supervisor/human resources manager				
Income from Other Sources						
Other income source	Amount	\$ Frequenc	у			
Other income source Amou		\$ Frequenc	у			

	PART	3 - ASSETS &	ABILITIES			
	Name	e of your financ institution	Branch or address	Account Number	Type of Acct	
X	XXXX	XXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXX	(X
X)	XXXX	XXXXXXXXX	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	\$xxxxxxxxxxxxxx	XXXXXXXX	X
X)	XXXX	XXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXX	X
X)	XXXX	XXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXX	XXXXXXXXX	X





☐Tenant ☐Guarantor

Name of Applicant:		

Please list ALL of your financial obligations below.							
Name of Creditor	Address	Phone Number	Monthly Pmt. Amount				
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	<xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx< td=""><td>XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX</td><td>XXXXXXXXX</td></xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx<>	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXX				
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1	(XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	1.					

ation	Phone

PART 5 - REFERENCES				
Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				
2.				



☐Tenant ☐Guarantor

Name of Applicant:		

	IEOUS INFORMATION		BINDS TO STREET
Vehicles			的可以是可以的人的
Automobile #1	Make:	Model:	
	Year:	License #:	
Automobile #2	Make:	Model:	
	Year:	License #:	
Other motor vehicles (lisall):	st		
Other Information			
	bankruptcy? ☐ No ☐ Yes		
If yes, explain:			
Have you ever been evi	cted or asked to move?	lo T Vos	
If yes, explain:	cted of asked to move!	IO LI 165	
r yes, explain.			
Do you have pets? No	o 🗇 Yes		
f yes, describe:			
, ,			
	12 T No T Yes		
Do you have a waterbed			
Do you have a waterbed f yes, describe:			
	5 5		
	5 110 5 100		





□Tenant	
☐Guarantor	

Name of Applicant:			

PART 7 - ICRAA NOTICE

NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT

Landlord does not intend to request an investigative consumer report regarding the Applicant

Unless the box above is checked, Landlord intends to request an investigative consumer report regarding the Applicant's character, general reputation, personal characteristics, and mode of living. Under Section 1786.22 of the California Civil Code, the files maintained on you by the investigative consumer agency shall be made available to you during business hours and on reasonable notice, provided you furnish proper identification, as follows: (1) You may appear at the investigative consumer reporting agency identified below in person, (2) you may make a written request for copies to be sent by certified mail to a specified addressee, or (3) you may make a written request for a summary of the file to be provided over the telephone. The agency may charge a fee, not to exceed the actual duplication costs, if you request a copy of your file. The agency is required to have personnel available to explain your file to you, and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. If you are accompanied by a person of your choosing, the agency may require you to furnish a written statement granting permission to the investigative consumer reporting agency to discuss your file in the other person's presence. The agency that will prepare the report(s) identified in this section is listed below:



☐Tenant ☐Guarantor	Name of Applicant:
PART 8 – CONSIDERATION OF CREDIT HISTORY Important Information, read carefully:	
Under California law, applicants with a government rent providing lawful, verifiable alternative evidence of the applicant by the tenant, including, but not limited to, gover statements. If an eligible applicant elects to submit such alternative e	plicant'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 <u>ONLY</u> available to government ren 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 Applicant: read and check the box below. Applicant authorizes the Landlord to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history and employment 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 Applicant: read and check the box below. 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. Application will not be considered complete until Applicant submits their verifiable alternative evidence of the ability to pay.
y signing below, Applicant represents that all the aboreification of the above items, and agrees to furnish a uthorizes Landlord to obtain the reports indicated in less allow Landlord to disclose tenancy information to p	dditional references upon request. Applicant Part 8 of this Application. Applicant further consents
Date	Applicant (signature required)





□Tenant	
□Guarantor	

Name of Applicant:	

TO BE COMPLETED BY LANDLORD - SCREENING FEE DISCLOSURE AND ITEMIZATION

Landlord 🕱 does 🗆 does NOT require payment of a screening fee. If payment of a screening fee is <u>not</u> required, this portion of the Application may be left blank.

Landlord will require payment of a fee, which is to be used to screen Applicant. The total amount of the fee is specified below. As required by California Civil Code Section 1950.6, Landlord's screening process complies with at least one of the policies indicated below (*check one*):

First Qualified, First Approved. Landlord's written screening criteria are provided together with this Application. Completed applications are considered in the order received, and the first applicant who meets Landlord's screening criteria will be made an offer to rent. Applicants are not charged a screening fee unless or until their application is actually considered. In the case of payment of a screening fee tendered by cash, check, or money order at the time the Application is submitted, such payment will not be deposited or cashed, as applicable, unless this Application is actually considered. In the case of payment of a screening fee tendered by credit or debit card, payment may be authorized and a hold placed at the time the Application is submitted but such payment will not be charged unless this Application is actually considered. In the event Landlord inadvertently charges screening fees to multiple applicants as the result of concurrent submissions, Landlord will refund the screening fee within 7 days to any applicant whose application is not considered, except as otherwise agreed by applicant. Landlord is not required to refund a screening fee to an applicant whose application is denied, after consideration, because the applicant does not meet the landlord's established, written screening criteria.

□ Refund to Denied Applicants. Landlord will return the entire screening fee to any applicant who is not made an offer to rent, regardless of the reason, within 7 days of selecting an applicant for tenancy or 30 days of when the application was submitted, whichever occurs first.

	review oplicable 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	5.00	\$35.00

The amount charged is itemized as follows:

Actual cost for screening reports inclusive of

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports, as applicable:

credit history (Applicable for Applicants who selected Option 1 in Part 8 of this Application)	credit history (Applicable for Applicants who selected Option 2 in Part 8 of this Application)		
\$ 15.00	\$15.00		
\$_35.00			
3. \$ 35.00 of the screening fee shall be paid di	rectly to Landlord and \$ 0.00 shall be paid		



Actual cost for screening reports NOT including



□Tenant □Guarantor	Name of Applicant:
Option to receive receipt by email. (Landlord check receive a receipt by email. If you would like to have your	only if applicable) If box is checked, Applicant can choose to receipt emailed
to you, please provide your email address here:	(Applicant fill in email address, if electing email receipt)
If the box is not checked, or if you do not provide a valid address listed in Part 1 of this Application, or provided pe	





□Tenant	Name of Applicant:
□ Guarantor	

CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

We, the members of the California Apartment Association, support the spirit and intent of all local, state and federal fair housing laws for all residents without regard to protected characteristics including race, color, religion, age, sex, sexual orientation, gender, gender identity, gender expression, genetic information, marital status, military or veteran status, national origin, ancestry, immigration status, familial status, source of income, disability of that person or whether that person is the victim of domestic violence, dating violence, sexual assault, stalking, human trafficking, or abuse of an elder or a dependent adult, or any combination of these characteristics.

We believe 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:

- 1. 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.
- 2. 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.
- 3. 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."
- 4. 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.



