

## Rental Requirements

### **Income Requirements:**

- Applicants must have a current, verifiable gross income of three times (3), the amount of the rental rate for the unit for which the applicant applies for.
- Applicants must provide paycheck stubs as proof of income, (2-3 current months). If self-employed, applicant to provide the most current income tax returns, and/or additional supporting documentation.

#### **Credit History:**

- A credit check and unlawful detainer registry check will be run on all applicants.
- Applicants must have good credit.
- We do not accept "reusable tenant screening reports" from a third party.

#### References

Applicants must have good rental history, and employment references.

### **Additional Requirements:**

- Applicants must provide valid photo identification.
- Initials funds for move-in (security/holding deposit and the first months' rent) must be paid with a cashier's check or money order.

### **Security Deposits:**

ALL Security deposits are twice the monthly rent.

<u>Please Note!</u> There is a \$30.00 application screening fee per applicant, payable in cash/money order/cashier's check/Venmo. The \$30.00 fee is non-refundable fee. This fee is NOT collected until you have toured the property which you are applying for.

Each applicant 18+ years of age is required to complete an application.

## Return Completed Applications to:

CustomerService@CollinsPropertyManagement.net
OR
426 Sutton Way, Suite 104, Grass Valley CA 95945

\*Please do not send proof of income, copies of your license or any additional documentation other than the application until after you have toured the property with our agent. We will request additional documentation when needed.

| □Tenant    |
|------------|
| □Guarantor |

| Name of Applicant: |  |
|--------------------|--|
|                    |  |

# **APPLICATION TO RENT**

| Cast Name   First Name   Middle Name   Social Security Number or ITIN  | (A                           | II sections mu        | ust be   | complet                | ed)                   |       | Individ | ual ap  | plicatio                              | ns rec  | uired                 | from e      | ach oc                | cupa  | ant 18 ye | ars of a | age or old | er. |
|--|------------------------------|-----------------------|----------|------------------------|-----------------------|-------|---------|---|---------------------------------------|---|-----------------------|-------------|-----------------------|-------|-----------|----------|------------|-----|
| Date of birth  E-mail address  Mobile/Cell phone number  Mobile/Cell phone number  Mobile/Cell phone number  City  State  Dither ID  1. Present address  Date in  Date out  Landlord Name  Reason for moving out  City  State  Zip  Date in  Date out  Landlord Name  Landlord phone number  Reason for moving out  Reason for mo   |                              |                       |          | •                      |                       | Name  |         |   |                                       |   |                       |             |                       |       |           |          |            |     |
| Photo ID/Type   Number   Issuing government   Exp. date   Other ID    1. Present address   City   State   Zip   Date in   Date out   Landlord Name   Landlord phone number   Reason for moving out   Current rent   S  | Oth                          | er names used         | in the   | last 10 y              | ears                  |       | Wo      | ork pho   | ne numb                               | er  |                       |             | Home<br>(             | pho ) | ne numbe  | r        |            |     |
| Present address   City   State   Zip   | Date of birth E-mail address |                       |          |                        |                       |       | Mobile  |   |                                       |   | e/Ce                  | II phone no | umber                 |       |           |          |            |     |
| Date in Date out Landlord Name Current rent Reason for moving out City State Zip Date in Date out Landlord Name Landlord phone number Reason for moving out Rent at move-out Reason for moving out State Zip Date in Date out Landlord Name Landlord Phone number Reason for moving out Rent at move-out Rent at move-ou   | Pho                          | oto ID/Type           |          | Number                 | r                     |       |         | Issuin  | g governr                             | ment  |                       | Exp. dat    | te                    |       | Other ID  |          |            |     |
| Reason for moving out    Current rent   S  | 1.                           | Present addres        |          |                        |                       |       |         | City Sta  |                                       |   |                       | State       |                       | Zip   |           |          |            |     |
| \$ /Month  2. Previous address City State Zip  Date in Date out Landlord Name Landlord phone number  Reason for moving out \$ Rent at move-out \$ /Month  3. Next previous address City State Zip  Date in Date out Landlord Name Landlord phone number  Reason for moving out Rent at move-out \$ /Month  Proposed Occupants: List all in addition to yourself Name Name  Do you have pets? How did you hear about this rental?   |                              | Date in               | Date out | Date out Landlord Name |                       |       |         |   |                                       |   |                       |             | Landlord phone number |       |           |          |            |     |
| Date in Date out Landlord Name Landlord phone number  Reason for moving out \$\frac{\text{Rent at move-out}}{\$\frac{\text{\$\frac{\tinc{\text{\$\frac{\text{\$\circ{\car{\text{\$\frac{\text{\$\frac{\text{\$\frac{\circ{\tric{\tex |                              | Reason for moving out |          |                        |                       |       |         |   |                                       | TO SERVICE AND ADDRESS OF THE PROPERTY OF THE |                       |             |                       |       |           |          |            |     |
| Reason for moving out  Rent at move-out \$ //Month  State Zip  Date in Date out Landlord Name  Reason for moving out  Reason for moving out  Rent at move-out \$ //Month  Proposed Occupants: List all in addition to yourself  Name  Do you have pets?  How did you hear about this rental?   | 2.                           | Previous addre        | ess      |                        |                       |       |         |   |                                       | City  |                       |             | ,                     | State |           | Zip      |            |     |
| \$ /Month  3. Next previous address City State Zip  Date in Date out Landlord Name Landlord phone number  Reason for moving out Rent at move-out \$ /Month  Proposed Occupants: List all in addition to yourself Name Name  Do you have pets? Do you have a waterbed?  State Zip  Landlord phone number  Rent at move-out \$ /Month  Name  Do you have a waterbed?   |                              | Date in Date out      |          |                        | Landlord Name         |       |         |   |                                       |   | Landlord phone number |             |                       |       |           |          |            |     |
| Date in Date out Landlord Name Reason for moving out Rent at move-out \$\\$ \//Month  Proposed Occupants: List all in addition to yourself Name Name  Do you have pets? Do you have a pets?  List in Date out Landlord Name Landlord phone number Rent at move-out \$\\$ \//Month  Rent at move-out \$\\$ \//Month  Name  Name  Name  Do you have a waterbed?  Do you have a waterbed?  Do you have a waterbed?  |                              | Reason for moving out |          |                        |                       |       |         |   |                                       |   |                       |             |                       |       | /lonth    |          |            |     |
| Reason for moving out  Rent at move-out \$ /Month  Proposed Occupants: List all in addition to yourself  Name  Do you have pets?  How did you hear about this rental?  | 3.                           | Next previous         | addres   | S                      |                       |       |         |   |                                       |   | Ci                    | ty          | •                     |       | State     |          | Zip        |     |
| Proposed Occupants: List all In addition to yourself Name  Do you have pets?  How did you hear about this rental?  Name  Name  Name  Name  Name  Do you have a waterbed?   |                              | Date in Date          |          | Date out               | ate out Landlord Name |       |         | Name  | )                                     |   |                       |             | Landlord phone number |       |           |          |            |     |
| Occupants: List all Name Name  In addition to yourself Name  Do you have pets?  How did you hear about this rental?  |                              | Reason for mo         | ving o   | ut                     |                       |       |         |   |                                       |   |                       |             | Rent<br>\$            | at m  |           | /lonth   |            |     |
| List all in addition to yourself Name Name  Do you have pets?  How did you hear about this rental?   |                              |                       | Name     |                        |                       |       |         |   |                                       |   | Name                  |             | •                     |       |           |          |            |     |
| Do you have Describe Do you have a waterbed?  How did you hear about this rental?  | List all in addition         |                       | Name     |                        |                       |       |         |   |                                       | Name  |                       |             |                       |       |           |          |            |     |
| pets? waterbed? How did you hear about this rental?  | to y                         | ourself               | Name     |                        |                       |       |         |   |                                       |   | Name                  | 9           |                       |       |           |          |            |     |
|  | Do<br>pet                    | you have<br>s?        | Descri   | be                     |                       |       |         |   |                                       |   |                       | De          | scribe                |       |           |          |            |     |
| A. Current Employer Name Job Title or Position Dates of Employment   | Hov                          | w did you hear        | about 1  | this renta             | l?                    |       |         |   |                                       |   |                       |             |                       |       |           |          |            |     |
|  | Α.                           | Current Emplo         | yer Na   | me                     |                       |       |         |   |                                       | Job Tit   | le or P               | osition     |                       |       |           | Dates o  | f Employme | ent |
| Employer address Employer/Human Resources phone number   |                              | Employer address      |          |                        |                       |       |         |   | Employer/Human Resources phone number |   |                       |             |                       |       |           |          |            |     |
| City, State, Zip Name of your supervisor/human resources manager   | City, State, Zip             |                       |          |                        |                       |       |         | Name of your supervisor/human resources manager |                                       |   |                       |             |                       |       |           |          |            |     |
| Current gross income Check one   |                              | rrent gross inco      | ome      |                        |                       |       |         |   |                                       |   |                       |             |                       |       |           |          |            |     |
| \$ Per □ Week □ Month □ Year  B. Prior Employer Name Job Title or Position Dates of Employment   | \$<br>B.                     | Prior Employer        | r Name   | 1                      | Per                   | □ Wee | k 🗆 Mo  | onth  | □ Year                                | Job Tit   | le or P               | osition     |                       | -     |           | Dates o  | f Employme | ent |
| Employer address Employer/Human Resources phone number   |                              | Employer address      |          |                        |                       |       |         | Employer/Human Resources phone number           |                                       |   |                       |             |                       |       |           |          |            |     |
| City, State, Zip Name of your supervisor/human resources manager   |                              | City, State, Zip      |          |                        |                       |       |         |   |                                       | Name of your supervisor/human resources manager   |                       |             |                       |       |           |          |            |     |
| Other income source  |                              | or income serv        | roo      |                        |                       |       |         |   | Amount f                              |   |                       |             | F                     |       |           |          |            |     |
| Other income source Amount \$ Frequency           Other income source Amount \$ Frequency  |                              |                       |          |                        |                       |       |         |   |                                       |   |                       |             |                       |       |           |          |            |     |





| ☐Tenant<br>☐Guarantor  |               |  |           |            |                   | Name of Applicant                     | :  |
|--|---------------|--|-----------|------------|-------------------|---------------------------------------|--|
| Name of your bank  |               | Branch or address                                |           |            | Acc               | ount Number                           | Type of Acct                                     |
| The state of the s |               | 214/011/01/44/01/05                              |           |            |                   |                                       |  |
|  |               |  | $\int$    |            |                   |                                       |  |
|  |               |  | <i></i>   |            |                   | $\overline{}$                         |  |
|  |               | Please list ALL of your finance                  | ial oblig | gations be | elow.             | <b>~</b>                              |  |
| Name of Creditor   |               | Address  |           |            | Ph                | one Number                            | Monthly Pmt.<br>Amt.                             |
|  |               |  |           |            | _/>_              |                                       |  |
|  |               | /  |           | (          | $\longrightarrow$ |                                       | <del>                                     </del> |
|  |               | <del>                                     </del> | $ar{}$    | (          | / \               |                                       |  |
|  | $\overline{}$ |  | 1         |            | / ,               |                                       |  |
|  |               |  |           |            | )                 |                                       | <i>Y</i>   |
| In case of emergency, no   | tify:         | Address: Street,                                 | City, Sta | ate, Zip   |                   | Relationship                          | Phone  |
| 1.   |               |  |           |            |                   |                                       |  |
| 2.   |               |  | -         |            |                   |                                       |  |
| (NOT Family) Personal References:  |               | T  |           | Lengt      |                   |                                       |  |
| Personal References:   |               | Address: Street, City, Stat                      | e, Zip    | Acquair    | ntance            | Occupation                            | Phone  |
|  |               |  |           |            |                   |                                       |  |
| 2.   |               |  |           |            |                   | · · · · · · · · · · · · · · · · · · · |  |
| automobile: Make:  |               | Model:   |           | Yea        | ır:               | License #:                            | <del></del>                                      |
| utomobile: Make:   |               | Model:   |           | Yea        | ır                | License #:                            |  |
| Other motor vehicles:  |               |  |           |            |                   |                                       |  |
| lave you ever filed for bankruptcy   | ?             | Have you ev                                      | er been   | evicted or | asked to i        | move?                                 |  |

| ☐Tenant ☐Guarantor  Name of Applicant:  |   |
|---|---|
| NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT   |   |
| ☐ Landlord does <u>not</u> 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, reputation, personal characteristics, and mode of living. Under Section 1786.22 of the California Civil Code, the files maintained on y investigative consumer agency shall be made available to you during business hours and on reasonable notice, provided you furnish identification, as follows: (1) You may appear at the investigative consumer reporting agency identified below in person, (2) you may 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 be provided over the telephone. The agency may charge a fee, not to exceed the actual duplication costs, if you request a copy of you agency is required to have personnel available to explain your file to you, and the agency must explain to you any coded information in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identific 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 in this section is listed below: | ou by the proper make a of the file to pur file. The appearing cation. If you |
| Smart Move, Trans Union   |   |
| Name of Agency  |   |
| Address of Agency ()  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 p Landlord. Landlord may contract with another entity to send a copy of the report.   | rovided to  |
| Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agree furnish additional credit references upon request. Applicant authorizes Landlord to obtain reports that may include credit reunlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tens and employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or subsequent Landlords.  Landlord will require a payment of \$   | reports,<br>ant history   |
| Cost to obtain, process and verify screening information (may include staff time and other soft costs)  |   |
| 3. Total fee charged  | _   |
| The undersigned Applicant is applying to rent the premises designated as:   |   |
| Apt. No Located at  |   |

The rent for which is \$ \_\_\_\_\_ per \_\_\_\_. Upon approval of this application, and execution of a rental/lease agreement, the

Applicant (signature required)

applicant shall pay all sums due, including required security deposit of \$\_\_\_\_\_, before occupancy.



Date