

CASTLE KEEPERS, INC.

1045 Mill Street
San Luis Obispo, CA 93401
805-543-9138 or fax 805-543-9145

APPLICATION TO RENT

Applications must be completely filled out and signed. We reserve the right to refuse to process any application that is not filled out completely. One application must be filled out for each adult age 18 or older.

Address of Rental(s) _____

Applicant Full Name _____ Primary Phone # _____

Work# _____ Cell# _____ Email address _____

SS# _____ Birthdate / / Drivers License# _____

Names of all proposed Occupants (list those other than yourself) _____

Vehicle Information

Make _____ Model _____ Year _____ License# _____ Color _____

Make _____ Model _____ Year _____ License# _____ Color _____

Do you have Pets? (# & Type) _____ Spayed/Neutered? _____

Present Street Address _____ City _____ State _____

Zip Code _____ Dates/From _____ to _____ Reason for moving/current rent _____

Landlord Name _____ Phone _____

Previous Street Address _____ City _____ State _____

Zip Code _____ Dates/From _____ to _____ Reason for moving/rent paid _____

Landlord Name _____ Phone _____

Previous Street Address _____ City _____ State _____

Zip Code _____ Dates/from _____ to _____ Reason for moving/rent paid _____

Landlord Name _____ Phone _____

Present Occupation or Source of Income _____

Employer _____ How Long? _____ Phone _____

Address _____ Current monthly income \$ _____ Job Title _____

Have you ever been evicted or received a "3 Day Notice to Pay Rent or Quit"? No Yes

Have you ever filed for Bankruptcy No Yes

Have you ever had an account placed "in collection" for failure to make payment? No Yes

Do you plan to sublet any of the property during any of the lease term? No Yes

Do you or any proposed occupant(s) smoke inside or out? No Yes

Do you own liquid-filled furniture (e.g., waterbed, aquarium)? No Yes

Have any of the properties you resided in received a *Disturbance Advisement Card*

From SNAP Citation, or Enforcement Action during your tenancy? No Yes

PLEASE COMPLETE REVERSE SIDE

PERSONAL CHARACTER REFERENCES -previous employer, professor, teacher, mentor, coach, co-worker, etc.) List name, email address or phone number and your relationship to each reference. ***NOT listed on previous page and DO NOT list relatives, friends or family friends***

<i>Name</i>	<i>email or phone #</i>	<i>Relationship</i>
1. _____		
2. _____		
3. _____		

If receive parental support and/or financial aid:

Parent(s)/Guardian(s) Name(s) _____

Phone _____ Address _____

Amount of support received: \$ _____ Financial aid received: \$ _____

Emergency Contact: _____ Phone: _____

Applicant represents the above information to be true, accurate and complete and hereby authorize verification of the information provided, including but not limited to obtaining a credit report. Applicant understands that any misrepresentation of the above information will void this application or related agreements.

Print Name _____ **Date** _____

Applicant Signature _____

*****If your application is approved the Security Deposit (1 ½ times one month rent) will be required within 24-48 hrs to hold the rental. The Security Deposit and First Rent Due are required to be paid in the form of “guaranteed funds” (a cashier’s check or money order). Future rents may be paid with ONE personal check each month.**

RECEIPT FOR SCREENING FEE

THIS SECTION TO BE COMPLETED BY AGENT, LANDLORD OR MANAGER

Applicant has paid a screening fee of \$20.00, applied as follows: \$ 10.50 for credit report, and \$9.50 for processing.

The screening fee is evidenced by:

Personal Check, Cash _____, payable to Castle Keepers, Inc.

The undersigned has read the foregoing and acknowledge(s) receipt of a copy.

Applicant _____

Date _____