APPLICATION TO RENT

NORTH LAKE PROPERTY MANAGEMENT 904 S. MAIN ST. LAKEPORT CA 95453 BRE# 02053937, Patricia Clott, Broker 707-263-3726 FAX: 707-263-9324

WWW.NORTHLAKEPM.COM

NAME OF APPLICANT		
ARE YOU THE PERPOSED TENANT?	CO-TENA	NT?
What property are you interested in?		
Proposed movein date is:		
	Social security Nur	
Driver License Number:	State:	Expires:
Phone Numbers: Home:		Work:
Coll.		Work: Email:
Name of other all proposed occupants:		
Pets:	Service Number:	
Auto: Make:	Model:	License Number:
Auto: Make:	_	License Number:
		
In case of Emergency the person to notify:		Relationshop:
Address:		Phone numbers:
Residence History:		
Current Address:		Previous Address:
City/State/Zip:		City/State/Zip:
Fromto		Fromto
Landlord Name:#_		Landlord Name:#
Do you own this property: No or	Yes	Do you own this property: No or Yes
Resaon of leaving current address:		Resaon of leaving current address:
Employment and Income History:		
Current employer:		Address:
How long have you worked there?	Superv	visors Name:
Supervisors Phone Number:		_Gross Monthly Income \$
Other Income:		

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Personal References		
Name:	Address:	
Phone Number:	Length of acquaintance:	_
Name:	Address:	
Phone Number:	Length of acquaintance:	_
Name:	Address:	
Phone Number:	Length of acquaintance:	_
(2) That the Landlord, Manager or Ager	 this is an application to rent only and does not gaurantee that applicant will be offered the I may accept more that one application for the Premises and, using their sole discretion, will se dicant will supply a copy of the driver's license upon request. 	•
information provided: and (2) obtain a may include, but not limited to, crimina	cion to be true and complete, and hereby authorizes Landlord, Manager or Agent to (1) verify to redit report on applicant and other report, warnings and verification on and about the application background checks, reports on unlawful detainers, bad checks, fraud warnings, employment a	nt, which and tenant
	ndlord, Manager or Agent to disclose information to prior or subsequent owners and/ or agent eceived without screening fee: (1) application will not be processed, and (2) the application an	
Applicant Signature:	Date:	
Applicant has paid a non-refundable screen	ng fee of \$40.00,	
Applicant Signature:	Date:	