

## **PACIFIC Sales & Management**

329 11<sup>th</sup> Street

Oakland, CA 94607

Phone: (510) 763-8600

Fax: (510) 763-8611

### 1) APPLICATION PROCESS

- Provide a valid Driver's License
- Copy of 2 Most recent Paystub
- Complete rental applications for applicants over 16 years old
- Tenant screening fee of \$30.00 (Cash Only)
- Personal credit reports from other agencies NOT accepted

### 2) LEASING REQUIRMENTS

- Positive Credit Report – FICA Score above 600
- Positive Rental History – No Unlawful Detainers
- Income Requirements – 3 times rent (Paystubs required)

### 3) SECURITY DEPOSIT 1.5 X RENT (minimum)

**PACIFIC Sales & Management is an Equal Opportunity Housing Provider**

# APPLICATION TO RENT OR LEASE

- \$30.00 Cash Application Fee  
\* **Non - Refundable**
- Copy of Picture I.D.
- 2 Most Recent Paystub

**APPLICANT** Each Applicant over the age of 18 must complete their own application form

**PLEASE PRINT**

First, Middle, Last Name	Date of Birth	Social Security #	Driver's License #
Other Names Used In the Last 10 Years	Home Phone	Cell Phone	Email Address

**ADDITIONAL OCCUPANTS** List everyone, who will live with you:

First, Middle, Last Name	Relationship To Applicant

**EMPLOYMENT**

	Current Employment	Prior Employment
Employer		
Address		
Employer Phone		
Job Title		
Name of Supervisor		
Dates of Employment	From:                      To:	From:                      To:
Income Per Month	\$	\$

**RESIDENCE**

	Current Residence	Previous Residence	Previous Residence
Street Address			
City			
State & Zip			
Dates of Stay			
Owner/Manager And Phone number			
Reason For Leaving			
Last Rent Paid	\$	\$	\$

**VEHICLES**

Automobiles	Make	Model	Color	Year	License No.
Motorcycles					

**PERSONAL REFERENCES**

In Case Of Emergency, Notify	Address/City	Phone	Relationship
Close Friend			
Nearest Relative Living Elsewhere			



**CREDIT INFORMATION** Please list all your financial obligations

Name of Bank or Savings & Loan		Branch or Address		Account No.		Balance
				Checking		\$
				Savings		\$
Credit Accounts	Account No.	Address/City	Phone	Balance	Due Monthly	

**GENERAL INFORMATION** Check answer that applies

- Do you smoke?  YES  NO
- Do you have any pets?  YES  NO
- Have you ever filed for bankruptcy?  YES  NO
- Do you have any musical instruments?  YES  NO
- Do you have any water-filled furniture or do you intend to use water filled furniture in the apartment?  YES  NO
- Have you ever been convicted for selling, possessing, distributing or manufacturing illegal drugs or convicted of any other crime?  YES  NO
- Have you ever been evicted for non-payment of rent or any other reason?  YES  NO

Please explain any "yes" answers to the above questions:

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Why are you leaving your current residence? \_\_\_\_\_

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The applicant hereby applies to rent/lease Apartment # \_\_\_\_\_ at \_\_\_\_\_ for \$ \_\_\_\_\_ per month, and upon owner's approval agrees to enter into a Rental Agreement and/or Lease and pay all rent and security deposits required before occupancy.

An application fee of \$ \_\_\_\_\_ is hereby submitted for the cost of processing this application, to obtain credit history and other background information.

**Applicant represents that all information given on this application is true and correct. Applicant hereby authorizes verification of all references and facts, including but not limited to current and previous landlords and employers, and personal references. Applicant hereby authorizes owner/agent to obtain Unlawful Detainer, Credit Reports, Telechecks, and/or criminal background reports. Applicant agrees to furnish additional credit and/or personal references upon request. Applicant understands that incomplete or incorrect information provided in the application may cause a delay in processing which may result in denial of tenancy. Applicant hereby waives any claim and releases from liability any person providing or obtaining said verification or additional information.**

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Signature required)





## **Authorization to Release Information Form**

I, \_\_\_\_\_ (APPLICANT),  
have submitted an application to lease a property located at:

Property Address:

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The landlord, agent or landlord's representative (REVIEWER) who will verify information in the lease application is:

Name: **PACIFIC** Sales and Management - \_\_\_\_\_

Phone: (510) 763-8600

Fax: (510) 763-8611

Email: \_\_\_\_\_

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I hereby give my express permission: **(1)** to my current and former employer[s] to release any and all information about my employment history and income history to the above-named REVIEWER; **(2)** to my current and former landlord[s] to release any and all information about my rental history to the above-named REVIEWER; **(3)** to my current and former mortgage lender[s] on property that I own or have owned to release any and all information about my mortgage payment history to the above-named REVIEWER; **(4)** to my bank, savings and loan, or credit union to provide a verification of funds that I have on deposit to the above-named REVIEWER; and **(5)** to the above-named REVIEWER to obtain a copy of my consumer report (credit report) from any consumer reporting agency and to obtain criminal background information about me.

This authorization is valid for thirty (30) days from the date indicated below, or until the lease application review process has been completed, whichever is later. I may withdraw my authorization at any time by submitting a written request to the REVIEWER. If I do, I understand that my personal information may have already been released after I gave permission. Moreover, I hereby release the REVIEWER from any civil or criminal liability whatsoever for seeking such requested information and for evaluating such information as it relates to my lease application. I hereby agree that a photo static or electronic copy of this application shall be as valid as the original. I represent and warrant that I'm authorized to execute this authorization and release regarding personal information on behalf of Applicant and any other person(s) described in the application. **I have read and fully understand the above statements.**

\_\_\_\_\_  
(Applicant's signature)

\_\_\_\_\_  
(Print Applicant's name)

\_\_\_\_\_  
(Date)

# RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of Applicants for rental housing. The information provided by the current or former Owner/Agent may be used solely for the purpose of evaluating the application for rental housing.
- The Owner/Agent requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 2. Copies of this form and of the Applicant's signature are acceptable.
- The Applicant may be contacted to verify the authenticity of this request.

## 1. Person requesting the rental reference

Name of Owner/Agent \_\_\_\_\_  
Address \_\_\_\_\_ Unit # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone number (\_\_\_\_\_) \_\_\_\_\_ Fax number (\_\_\_\_\_) \_\_\_\_\_

## 2. Authorization by rental Applicant for the release of information

*I hereby authorize the release of the information requested on this Rental Applicant Reference Request to the Owner/Agent listed above. I hereby acknowledge that the Owner/Agent can make copies of this executed page in order to obtain the information requested.*

Name \_\_\_\_\_ Phone number (\_\_\_\_\_) \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

## 3. Applicant's rental information

Name of rental community (if any) \_\_\_\_\_  
Address of rental unit \_\_\_\_\_ Unit # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Name of Owner/Agent \_\_\_\_\_  
Phone number (\_\_\_\_\_) \_\_\_\_\_ Fax number (\_\_\_\_\_) \_\_\_\_\_  
Move-in date: Month \_\_\_\_\_ Year \_\_\_\_\_ Move-out date: Month \_\_\_\_\_ Year \_\_\_\_\_ or  current resident

## 4. Rental reference information provided by former or current Owner/Agent

Did Applicant live at your property during the period indicated above? .....  Yes  No  
If no, what were the dates of occupancy? From (month/year): \_\_\_\_\_ / \_\_\_\_\_ To (month/year): \_\_\_\_\_ / \_\_\_\_\_  
How many times during the past 12 months did Applicant pay the rent late? .....  0  1-2  3-5  6 or more  
Was any check from Applicant returned due to non-sufficient funds (NSF)? .....  Yes  No  
Did you ever file for an unlawful detainer against Applicant for unpaid rent? .....  Yes  No  
If yes, what was the result? \_\_\_\_\_

Does Applicant owe any amount for delinquent rent, utilities or damage to unit? .....  Yes  No  
Did Applicant provide notice for ending tenancy according to the terms of the rental agreement? .....  Yes  No  
 Not applicable because Applicant still resides at unit  
Did you ever serve a Three Day Notice to Applicant .....  Yes  No  
If yes, please explain: \_\_\_\_\_

Information provided by: Name \_\_\_\_\_ Phone number (\_\_\_\_\_) \_\_\_\_\_

Information obtained by:  Phone  Mail  Fax

Please mail or fax this form to the person listed in section 1 as soon as possible (within 24-48 hours)

