

ANGELES PROPERTIES RENTAL APPLICATION

First Middle Last Birth Date Social Security # Driver's License #

Names you've used in the past Home Phone Cell Phone

All Other Proposed Occupants	Age	Relationship to Applicant

RENTAL/RESIDENCE HISTORY

Current Residence

Street Address City State Zip
Yes / No

Dates of Residency (To - From) Monthly Rent Utilities Included

Owner/Manager Name Own/Mgr's Phone Number

Reason for Leaving

was rent paid on time number of late payments paid in full did you give notice

Previous Residence

Street Address City State Zip
Yes / No

Dates of Residency (To - From) Monthly Rent Utilities Included

Owner/Manager Name Own/Mgr's Phone Number

Reason for Leaving

was rent paid on time number of late payments paid in full did you give notice

EMPLOYMENT HISTORY

Current Employer

Name of Employer Employer's phone number

Street Address City State Zip

Name of Supervisor Employer's phone number

Gross Monthly Pay Employment Dates (To - From)

Previous Employer

Name of Employer	Employer's phone number		
Street Address	City	State	Zip
Name of Supervisor	Employer's phone number		
Gross Monthly Pay	Employment Dates (To - From)		

CREDIT HISTORY

	Bank/Institution	Monthly Payment	Account Balance
Check Account			
Savings Account			

Credit Card			
Credit Card			
Credit Card			
Auto Loan			
Auto Loan			
Other _____			
Other _____			

VEHICLES

Make/Model	Color	Year	License Plate

REFERENCES & EMERGENCY CONTACTS

Nearest Relative Living Elsewhere	Phone Number	Relationship
Street Address	City	State Zip
Other Contact	Phone Number	Relationship
Street Address	City	State Zip

By signing the application you grant us permission to communicate with all of the contacts listed in this section in the event we can't locate you. If you abandon the residence for any reason you also grant us permission to allow your contact listed above to remove all contents of the dwelling on your behalf.

GENERAL INFORMATION

Have you ever been served a late rent notice? _____

Do any of the people who would be living in the residence smoke? _____

How long do you think you will be renting from us? _____

Have you ever filed for bankruptcy? If so, when? _____

Have you ever been convicted of a felony? _____

Have you ever been served an eviction notice, If so when? _____

How many pets do you have? (list Type, Breed, approx Weight & Age) _____

List any verifiable sources & amounts of income? (optional) _____

Email address: _____

Contact preferences - **email** **phone** **text** (circle all that apply)

All information herein is true and correct and becomes a part of any lease I may enter into. Kim and Jerry Angeles are authorized by me to verify the above information. This application does not mean that a lease or a property offered to me. Any such offering will be solely at the discretion of the owner of the property. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application. I understand that any discrepancy or lack of information may result in the rejection of this application. I further understand that there is a non refundable fee to cover the cost of the processing of my application and I am not entitled to a refund even if I don't get the residence. Any questions regarding rejected applications must be submitted in writing and accompanied by a self addressed stamped envelope.

Signature: _____

Date: _____

**** Each adult (18 or older) must fill out a separate application***

****There is a non-refundable fee of \$20.00/adult to apply***

Applications must be returned to Kim Angeles email (kangeles4163@gmail.com) or in person by appointment (417-861-4121 - phone)