

THE ENTERPRISE COMPANY

REAL ESTATE SALES AND MANAGEMENT

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APPLICANT, PLEASE INDICATE:

- ☐ Tenant
☐ Guarantor

Preferred Move-In Date: _____

APPLICATION TO RENT

(All sections must be completed)

Individual Applications required from each occupant 18 years of age or older.

LAST NAME		FIRSTNAME		MIDDLENAME		SOCIAL SECURITY NUMBER	
OTHER NAMES USED IN THE LAST 10 YEARS				WORK PHONE NUMBER		HOME PHONE NUMBER ()	
DATE OF BIRTH		EMAIL				MOBILE/CELL PHONE NUMBER ()	
DRIVER'S LICENSE NO.		EXPIRATION		STATE		OTHER ID	
1	PRESENT ADDRESS			CITY		STATE ZIP CODE	
	DATE IN		DATE OUT		OWNER/AGENT NAME		OWNER/AGENT PHONE NO. ()
	REASON FOR MOVING					CURRENT RENT \$ / Month	
2	PREVIOUS ADDRESS			CITY		STATE ZIP CODE	
	DATE IN		DATE OUT		OWNER/AGENT NAME		OWNER/AGENT PHONE NO. ()
	REASON FOR MOVING						
3	NEXT PREVIOUS ADDRESS			CITY		STATE ZIP CODE	
	DATE IN		DATE OUT		OWNER/AGENT NAME		OWNER/AGENT PHONE NO. ()
	REASON FOR MOVING						
PROPOSED OCCUPANTS	NAME			NAME			
LIST ALL IN ADDITION TO YOURSELF							
WILL YOU have pets?	DESCRIBE			WILL YOU HAVE liquid-filled furniture?	DESCRIBE		

I ☐ am ☐ am not a member of the Armed Forces (including the National Guard and Reserves).

A	Present occupation or source of income		Employer name	
	How long with this employer	Supervisor's Phone # ()	Employer address	
	Name of your supervisor		City, State ZIP	
B	Prior occupation		Employer name	
	How long with this employer	Supervisor's Phone # ()	Employer address	
	Name of your supervisor		City, State ZIP	

Current gross income \$	PER	<input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year	Check One <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year	Please list ALL of your financial obligations below and on following page
Name of your bank		Branch or Address		

Name of creditor	Address	Phone Number	Monthly Pymt Amt
		()	
		()	
		()	
		()	
		()	
		()	

In case of emergency, notify:	Address: Street, City, State, Zip		Relationship	Phone
1.				()
2.				()
Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				()
2.				()

THIS BOX OFFICE USE ONLY:

Is parking available with this apartment? ☐ YES ☐ NO

PARKING

If available, would you like to apply for a parking space? ☐ YES ☐ NO

How many spaces? (More than one space not guaranteed.) ☐ 1 ☐ 2

Parking is \$ 95.00 per month, per space, in addition to apartment rent indicated below.

Please note that if you decline an available parking space at lease signing, you are not guaranteed one later if you change your mind.

Automobile: Make _____ Model _____ Year _____ License # _____

Automobile: Make _____ Model _____ Year _____ License # _____

Other motor vehicles: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____

Have you ever been convicted of selling, distributing or manufacturing illegal drugs? _____

Applicant represents that all the above statements are true and correct and hereby authorizes verification of the above items including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request. Applicant consents to allow Owner/Agent to disclose tenancy information to previous or subsequent Owners/Agents.

Owner/Agent will require a payment of \$ 20.00, which is to be used to screen Applicant with respect to credit history and other background information. The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports **\$ 11.45**
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) **\$ 8.55**
3. Total fee charged (cannot exceed \$30 per applicant, which may be adjusted annually with the CPI as of 1-1-98) **\$ 20.00**

The undersigned 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 agreement or lease, the applicant shall pay all sums due, including required security deposit of \$ _____, before occupancy.

Date **Applicant (signature required)**

CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

The California Apartment Association supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

The California Apartment Association reaffirms its belief that equal opportunity can best be accomplished through effective leadership, education, and the mutual cooperation of owners, managers, and the public.

Therefore, as members of the California Apartment Association, we agree to abide by the following provisions of this Code for Equal Housing Opportunity:

- We agree that in the rental, lease, sale, purchase, or exchange of real property, owners and their employees have the responsibility to offer housing accommodations to all persons on an equal basis.
- We agree to set and implement fair and reasonable rental housing rules and guidelines and will provide equal and consistent services throughout our residents' tenancy.
- We agree that we have no right or responsibility to volunteer information regarding the racial, creed, or ethnic composition of any neighborhood, and we do not engage in any behavior or action that would result in "steering."
- We agree not to print, display, or circulate any statement or advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.