

APPLICATION TO LEASE OR RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 12/22)

I. APPLICATION TO RENT

THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO LEASE OR RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.

1.	Applicant is completing Application to Lease or Rent as a (check one) tenant, tenant with co-tenant(s) or guarantor/co-signor. Total number of applicants						
2.	PERSONAL INFORMATION						
	A. FULL NAME OF APPLICANT						
	B. Date of Birth (For p	purpose of obtaining credit reports. Age discrimination is prohibited by law.)					
	C. (1) Driver's License No.	State Expires					
	(2) See section II, 4 for Social Security Number/	Tax Identification Numbers. Such number shall be provided upon request					
		er or Agent, or Property Manager ("Housing Provider").					
	D. Phone number: Home	_ Work Other					
	E. Email:	Email:					
	F. Name(s) of all other proposed occupant(s) and relationship to applicant						
	G. Pet(s) (Other than service or companion animals) (number and type)					
	H. Auto: Make Model	number and type) Year License No State Color					
	Other vehicle(s):	· · · · · · · · · · · · · · · · · · ·					
		occupants of applicant's household)					
	RelationshipAddress	Phone					
	J Does applicant or any proposed occupant plan to us	Phone					
	If yes, type						
		action or filed bankruptcy within the last seven years?					
	L. Has applicant or any proposed occupant ever been	asked to move out of a residence?					
	If yes, explain	n convicted of or pleaded no contest to a felony within the last					
	M. Has applicant or any proposed occupant ever been	convicted of or pleaded no contest to a felony within the last					
	seven years?						
	If yes, explain						
		der may consider the nature of the felony and the length of time since it					
	occurred so long as the felony is directly related to the applicant's ability to meet its obligations under the lease to other relevant mitigating information pursuant to 2 CCR §12266.)						
_		30K §12200.)					
3.							
	Current address	Previous address					
	City/State/Zip to From to	City/State/Zip					
	From to	toto					
	Name of Housing Provider	Name of Housing Provider					
	Housing Provider's phone Do you own this property? Yes No	Housing Provider's phone Did you own this property? Yes No					
	Do you own this property?	Did you own this property?					
	Reason for leaving current address	Reason for leaving this address					
4.	EMPLOYMENT AND INCOME HISTORY						
٦.		Previous employer					
	Current employer address	Previous employer address					
	Current employer address to to	Previous employer address to to					
	Supervisor	Supervisor Supervisor's phone					
	Supervisor's phone per per	Supervisor's phone per					
	Other income info						
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LR	RA REVISED 12/22 (PAGE 1 OF 3)	Applicant's Initials () () Equal Housing					

www.lwolf.com

Pro	pert	y Address: 238 S. Arroyo	Parkway #213, Pasadena, C.	A 91105	Date:	
5.	CRI	EDIT INFORMATION				
	A.	CREDITORS				
		Name of Creditor:			Account	\$
		Monthly Payment: \$			Balance Due:	\$
		Name of Creditor:			Account	•
		Monthly Payment: \$			Balance Due:	\$
		Name of Creditor:			Account	
		Monthly Payment: \$			Balance Due:	\$
		Name of Creditor:			Account	•
		Monthly Payment: \$			Balance Due:	\$
	B.	BANKING				
		Name of Bank/Branch:			Account No	
		Type of Account:			Account Balance: \$	
		Name of Bank/Branch:			Account No	
		Type of Account:			Account Balance: \$	
6.	DE	RSONAL REFERENCES			, 1000dill 2 didiloo. 4	
٥.	Nar	ne	Address			
	Pho	one	Address Length of acquaintance	Occupation		
	Nar	me	Address			
	Pho	one	Address Length of acquaintance	Occupation		
7.		AREST RELATIVE(S)		·		
•			Address			
	Pho	one	Relationship			
	Nar	ne	Address			
	Pho	one	Address Relationship			
8.			es that: (i) this is an application to			
٥.			der may receive more than one ap			
			ther acceptable identification upo		, , , , , , , , , , , , , , , , , , ,	
			information to be true and comp	-	horizes Housing Prov	vider to: (i) verify the
			ain a credit report on applicant ar			
			ude, but not be limited to, crimina			
			at and tenant history. By signing			
			IVESTIGATION PURSUANT TO			
		■ □ Dlagge shock this be	x if you would like to receive, at	no charge a conv of	an ICD or consumer	aradit rapart if ana is
	obtained by the Housing Provider whenever you have a right to receive such a copy under California law.					
9.			ing Provider to disclose information	n to prior, current, or su	ubsequent owners and	I/or agents with whom
	app	licant has had, or intends to ha	ave, a rental relationship.			
	If ap	oplication is not fully complete	d, or if section II, 2 is applicable a	nd the application is re	ceived without the full	screening fee: (i) the
	арр	lication will not be processed,	and (ii) the application and any po	rtion of the screening fe	ee paid will be returne	d.
	App	olicant Signature			Date	
	Ret	urn your completed applicatio	n and any applicable fee not alrea	ady paid to: <u>Re/Max R</u>	esources	
	Add	ress 101 North Indian Hill R	Ivd., Suite C1-208 City	Claremont	State CA	Zip 91711
						r <u>*****</u>



Property Address: 238 S. Arroyo Parkway #213, Pasadena, CA 91105	Date:	
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II. PROPERTY INFORMATION AND SCREENING FEE

THIS SECTION TO BE COMPLETED BY HOUSING PROVIDER (applicant may fill in the "Premises" in paragraph 1A below):

	Applicant submits t				
	91105		("Premises") or 🗌 any		
		ns which may fit Applicant's rental criteria.			
В.		Rent per month.			
		date:			
. sc	CREENING FEE				
Α.	A. Applicant will provide screening information and fee directly to Housing Provider's authorized screening service a				
В.	follows: (Civil Code Price Index. As an	Section 1950.6 sets the maximum screening fee that	per applicant, directly to Housing Provider, applied as it can be charged, as adjusted annually by the Consumer \$52.46 per applicant, according to the DRE publication ureau of Labor Statistics website, www.bls.gov.)		
	\$	for credit reports prepared by	Type vendor name here ;		
			(other out-of-pocket expenses); and		
		for processing.	(**************************************		
C.	If 2B is selected, a		ing fee: (i) Housing Provider will notify Applicant, (ii) the on of the screening fee paid will be returned.		
D.	Applicant shall p	rovide Social Security Number/Tax Identification Nu	mber to Housing Provider.		
		·	mber to Housing Provider. ee and acknowledges receipt of a completed copy.		
he un		·	·		
he un	dersigned has read	·	ee and acknowledges receipt of a completed copy.		
he un	dersigned has read	·	ee and acknowledges receipt of a completed copy.		
he un	ndersigned has read	·	ee and acknowledges receipt of a completed copy. Date		

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NOTICE REGARDING BACKGROUND INVESTIGATION REPORTS PURSUANT TO CALIFORNIA LAW

(C.A.R. Form BIRN, 12/19)

(the "Landlord") intends to obtain information about you from a
investigative consumer reporting agency and/or a consumer credit reporting agency for the purpose letting a dwelling. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for housing purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("CRA"), the Landlord may investigate the information contained in your rental application and other background information about you, including but not limited to obtaining a criminal report, eviction report, verifying references, work history, your social security number, and other information about you, and interviewing people who are knowledgeable about you, the results of this report may be used as a factor in making housing decisions. The source of any investigative consumer report (as that term is defined under California law) will be:
CRA:, Address:
CRA:
The Landlord agrees to provide you with a copy of an investigative consumer report when required to do so under California law. Under California Code Civil Code section 1786.22, you are entitled to find out from a CRA what is in the ICRA's file on you with proper identification, as follows:
 In person, by visual inspection of your file during normal business hours and on reasonable notice. You also ma request a copy of the information in person. The CRA may not charge you more than the actual copying costs fo providing you with a copy of your file.
 A summary of all information contained in the CRA's file on you that is required to be provided by the Californi Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
 By requesting a copy be sent to a specified addressee by certified mail. CRAs complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after suc mailings leave the CRAs.
"Proper Identification" includes documents such as a valid driver's license, social security account number, militar identification card, and credit cards. Only if you cannot identify yourself with such information may the CRA requir additional information concerning your employment and personal or family history in order to verify your identity.
The CRA will provide trained personnel to explain any information furnished to you and will provide a written explanatio of any coded information contained in files maintained on you. This written explanation will be provided whenever a file i provided to you for visual inspection.
You may be accompanied by one other person of your choosing, who must furnish reasonable identification. A CRA marequire you to furnish a written statement granting permission to the CRA to discuss your file in such person's presence.
The undersigned acknowledges receipt of this Notice Regarding Background Investigation Reports Pursuant to Californi Law.
Applicant Signature Date

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