



APPLICATION TO RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 11/12)

I. APPLICATION TO RENT

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

1. **Applicant is completing Application as a (check one)** tenant, tenant with co-tenant(s) or guarantor/co-signor.
Total number of applicants _____
2. **PREMISES INFORMATION**
Application to rent property at 370A Arguello STUDIO APARTMENT, San Francisco, ("Premises")
Rent: \$ 1,800.00 per Month Proposed move-in date _____
3. **PERSONAL INFORMATION**
 - A. **FULL NAME OF APPLICANT** _____
 - B. Date of Birth _____ (For purpose of obtaining credit reports. Age discrimination is prohibited by law.)
 - C. Social security No. _____ Driver's license No. _____
State _____ Expires _____
 - D. Phone number: Home _____ Work _____ Other _____
 - E. Email _____
 - F. Name(s) of all other proposed occupant(s) and relationship to applicant _____
 - G. Pet(s) or service animals (number and type) _____
 - H. Auto: Make _____ Model _____ Year _____ License No. _____ State _____ Color _____
Other vehicle(s): _____
 - I. In case of emergency, person to notify _____
Relationship _____
Address _____ Phone _____
 - J. Does applicant or any proposed occupant plan to use liquid-filled furniture? No Yes Type _____
 - K. Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years? No Yes
If yes, explain _____
 - L. Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony? No Yes
If yes, explain _____
 - M. Has applicant or any proposed occupant ever been asked to move out of a residence? No Yes
If yes, explain _____
4. **RESIDENCE HISTORY**

Current address _____	Previous address _____
City/State/Zip _____	City/State/Zip _____
From _____ to _____	From _____ to _____
Name of Landlord/Manager _____	Name of Landlord/Manager _____
Landlord/Manager's phone _____	Landlord/Manager's phone _____
Do you own this property? <input type="checkbox"/> No <input type="checkbox"/> Yes	Did you own this property? <input type="checkbox"/> No <input type="checkbox"/> Yes
Reason for leaving current address _____	Reason for leaving this address _____
5. **EMPLOYMENT AND INCOME HISTORY**

Current employer _____	Previous employer _____
Current employer address _____	Prev. employer address _____
From _____ To _____	From _____ To _____
Supervisor _____	Supervisor _____
Supervisor phone _____	Supervisor phone _____
Employment gross income \$ _____ per _____	Employment gross income \$ _____ per _____
Other income info _____	Other income info _____

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Applicant's Initials (_____) (_____)

Reviewed by _____ Date _____



APPLICATION TO RENT/SCREENING FEE (LRA PAGE 1 OF 2)

Agent: Robert Moffatt	Phone: 415.722.4038	Fax: 415.642.8009	Prepared using zipForm® software
Broker: McGuire Real Estate 100 Clipper Street	San Francisco	, CA 94114	

Property Address: 370A Arquello STUDIO APARTMENT , San Francisco, Date: _____

6. CREDIT INFORMATION

Name of creditor	Account number	Monthly payment	Balance due

Name of bank/branch	Account number	Type of account	Account balance

7. PERSONAL REFERENCES

Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____
 Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____

8. NEAREST RELATIVE(S)

Name _____ Address _____
 Phone _____ Relationship _____
 Name _____ Address _____
 Phone _____ Relationship _____

Applicant understands and agrees that: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; (ii) Landlord or Manager or Agent may accept more than one application for the Premises and, using their sole discretion, will select the best qualified applicant, and (iii) Applicant will provide a copy of applicant's driver's license upon request.

Applicant represents the above information to be true and complete, and hereby authorizes Landlord or Manager or Agent to: (i) verify the information provided; and (ii) obtain credit report on applicant.

If application is not fully completed, or received without the screening fee: (i) the application will not be processed, and (ii) the application and any screening fee will be returned.

Applicant _____ Date _____ Time _____

Return your completed application and any applicable fee not already paid to: _____

Address _____ City _____ State _____ Zip _____

II. SCREENING FEE

THIS SECTION TO BE COMPLETED BY LANDLORD, MANAGER OR AGENT.

Applicant has paid a **nonrefundable** screening fee of \$ _____, applied as follows: (The screening fee may not exceed \$30.00, adjusted annually from 1-1-98 commensurate with the increase in the Consumer Price Index. A CPI inflation calculator is available on the Bureau of Labor Statistics website, www.bls.gov. The California Department of Consumer Affairs calculates the applicable screening fee amount to be \$42.06 as of 2009.)

\$ _____ for credit reports prepared by _____ ;

\$ _____ for _____ (other out-of-pocket expenses); and

\$ _____ for processing.

The undersigned has read the foregoing and acknowledges receipt of a copy.

Applicant Signature _____ Date _____

The undersigned has received the screening fee indicated above.

Landlord or Manager or Agent Signature _____ DRE Lic. # _____ Date _____

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Reviewed by _____ Date _____

