

TOWN 'N COUNTRY REALTY

35 Maple Street, Salinas, California 93901

Office: 831 424-0001 ~ Fax: 831 755-1624

APPLICATION TO RENT

A \$25 APPLICATION FEE IS REQUIRED WITH YOUR APPLICATION

Application to rent property located at _____.

Applicant 1

NAME: _____ Home phone: _____

Date of Birth: _____ Social Security Number: _____ Drivers License: _____

Employer: _____ Monthly Salary: _____

Length employed: _____ Position: _____ Work Phone: _____

Employer Address: _____

Supervisor: _____ Supervisors Phone: _____

Auto Make _____ Model _____ Year _____ License No. _____

Co-Applicant

NAME: _____ Home phone: _____

Date of Birth: _____ Social Security Number: _____ Drivers License: _____

Employer: _____ Monthly Salary: _____

Length employed: _____ Position: _____ Work Phone: _____

Employer Address: _____

Supervisor: _____ Supervisors Phone: _____

Employer Address: _____

Supervisor: _____ Supervisors Phone: _____

Auto Make _____ Model _____ Year _____ License No. _____

ADDITIONAL INCOME:

Source: _____ Amount: \$ _____

RENTAL REFERENCE:

Current Address: _____ City _____ State _____

Rent: ___ Own: ___ Monthly Rent / Mortgage: \$ _____

Length Of Residence: _____

If Renting Landlord's Name: _____ Phone: _____

Reason For Moving: _____

Previous Address: _____ City _____ State _____

Proposed Occupants (LIST ALL- NAME & AGE):

Do any proposed occupants smoke? Yes: _____ No: _____

PETS:

Dog ___ Cat ___ Other ___ Type _____

Age _____ Name _____ M ___ F ___ Spayed or neutered? _____.

REFERENCES

Name & Phone: _____

Name & Phone: _____

Name & Phone: _____

Bank _____ Branch _____ Phone _____

Address _____

Have you ever filed bankruptcy? _____ When: _____

Have you ever been evicted? _____ When: _____ Reason _____

Nearest Relative: Name _____ Relationship _____

Address _____ Phone _____

In case of an emergency notify:

Name _____ Phone _____

Address _____ Relationship _____

**I DECLARE THE FOREGOING INFORMATION IS CORRECT AND TRUE, AND
AUTHORIZE ITS VERIFICATION AND THE OBTAINING OF A CREDIT REPORT.**

APPLICANT 1 _____ DATE _____

APPLICANT 2 _____ DATE _____