Email: rebuildinglv@gmail.com Fax: 702-387-3874

Rental Application

Separate application	required from e	ach applicant age	18 or older.
<u> </u>			
ental Term Requested (please o	check): 1 YR	_ Month-Month	
ddress of Property to Be Ren	ted:		
cond Choice for Property:			
xpected Start Date:	Email Add	dress:	
pplicant			
Full Name—include all name	es you use(d): _		
Home Phone:	_ Work Phone: _	Cell	phone:
Social Security Number:	Drive	er's License Numb	er/State:
Driver's License Picture: Pl	ease submit one	by fax or email so	can
Other Identifying Informatio	n:		
Vehicle Make:	Model:	Color:	Year:
License Plate Number/State:			
Additional Occupants			
List everyone, including chil	dren, who will l	ive with you:	
Full Name		Relationship to Applicant	

Rental History Current Address: Dates lived at address: ______ Reason for leaving: Landlord/manager (name/phone#): Previous Address: Dates lived at address: ______ Reason for leaving: Landlord/manager(name/phone#): If **SELF-EMPLOYED** please skip the next section and include one of these: a. Last year's Tax Return b. 1 full year's bank account statements in lieu of income **Employment History** Name, Address and Phone number of Current Employer: Name/phone# of supervisor: Dates employed at this job: _____ Position: ____ Name, Address and Phone Number of Previous Employer:

Name/phone# of supervisor:

Income			
1. Your gross month	\$		
2. Average monthly	\$		
3. Other income, spe	cify source please		\$
		TOTAL:	\$
Financial Information	(Optional – Landlord	may request this later))
Bank/Financial Accounts Savings/Money Mkt:		Bank/Institution	Branch
Checking Account:			
Credit Information (M Type Credit Cards/Unsecured Loans	ANDATORY: Estima Total Borrowed/Owed	•	Current Monthly Payments
Secured Loans			
Other Obligations Miscellaneous			
Describe the number	and type of pets you w	ant to have in the rental	property:
Will any waterbeds of	or water-filled furniture	be on the property? []	yes [] no
Will applicant maint	ain renters insurance? [] yes [] no	
Does anyone who wi	ill occupy the property	smoke? [] yes [] no	
Is any occupant a reg	gistered sex offender? [] yes [] no	
Are there any crimin	al matters pending agai	nst any occupant? [] ye	es [] no

Does the applicant require any special needs (i.e. wheel chair access)? Please explain.

Has applicant ever:	Yes	No	Explanation
Been evicted?			
Been asked to move out by a			
landlord?			
File for bankruptcy?			
Been convicted of a crime?			
References and Emergency C			Deletion 1:
			Relationship:
Personal reference:			Relationship:
Address/Phone#:			
Contact in Emergency:			Relationship:
Address/Phone#:			
STATEMENT			
lease or rental agreement may incomplete statements in this a provided in this application fro landlords and employers, and prescurity freeze" on my credit promptly lift the freeze for a rethe Landlord/Manager; and I u	be term pplication mmy coersona information asonab ndersta	inated from I are credit so I referention while time and that	is true and correct and understand that my if I have made any material false or uthorize verification of the information ources, credit bureaus, current and previous nces. I understand that if I have initiated a ith any of the credit reporting agencies, I will so that my credit report may be accessed by if I fail to do so, the Landlord/Manager may § 1785.11.2.) This permission will survive
Signature/Date			