



Landlord Protection Service  
(800) 525-1988 Fax: (800) 834-5454

CLIENT: LIVERETT MGMT.

ACCOUNT #: 97096

Phone #: (916) 485-5575

Fax #: (916) 485-6788

By execution of this application, I hereby authorize Landlord Protection Service to run a consumer credit report.

LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

MIDDLE NAME/INITIAL: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

IN ORDER TO COMPLY WITH THE CREDIT REPORTING ACT, THE APPLICANT MUST READ AND SIGN THIS FORM BELOW. ORIGINAL SIGNATURE ON THIS FORM IS MANDATORY.

In compliance with the Fair Credit Reporting Act, we are informing you that information as to your character, general reputation and mode of living will be verified. I, as the applicant, represent that the facts set forth on this document are true and complete. I, as the applicant, agree that a complete investigation of all of the information on this document will *not* constitute an invasion of privacy. I authorize Landlord Protection Service to obtain credit reports, criminal background information and unlawful detainer histories as they pertain to me. Landlord Protection Service has my permission to release information found in this screening process.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
SIGNATURE OF MANAGER

\_\_\_\_\_  
Date

**APPLICATION TO RENT**  
Complete separate application for each adult tenant.

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**AVAILABLE PROPERTY INFORMATION**

LOCATION \_\_\_\_\_  
RENT \$ \_\_\_\_\_ PER \_\_\_\_\_ DATE OF MOVE-IN \_\_\_\_\_

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**YOUR INFORMATION**

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_  
LAST FIRST MIDDLE  
SOCIAL SECURITY # \_\_\_\_\_ DRIVER'S LICENSE/ID # \_\_\_\_\_ EXPIRES \_\_\_\_\_ STATE \_\_\_\_\_

HOME PHONE (\_\_\_\_) \_\_\_\_\_ WORK (\_\_\_\_) \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_

EMAIL \_\_\_\_\_

OTHERS TO OCCUPY THE PROPERTY & RELATIONSHIP \_\_\_\_\_

PET(S) \_\_\_\_\_

IN CASE OF EMERGENCY, CONTACT \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

DO YOU OR ANOTHER TENANT PLAN ON USING LIQUID-FILLED FURNITURE?  NO  YES

HAVE YOU BEEN INCARCERATED OR FILED BANKRUPTCY WITHIN THE LAST 7 YEARS?  NO  YES  
IF YES, EXPLAIN \_\_\_\_\_

HAVE YOU OR ANOTHER POSSIBLE TENANT BEEN CONVICTED OF OR PLEAD NO CONTEST TO A FELONY?  NO  YES  
IF YES, EXPLAIN \_\_\_\_\_

HAVE YOU OR ANOTHER POSSIBLE TENANT BEEN EVICTED FROM A PROPERTY?  NO  YES  
IF YES, EXPLAIN \_\_\_\_\_

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**PAST RESIDENCE**

CURRENT ADDRESS \_\_\_\_\_

STREET UNIT# CITY STATE ZIP  
HOW LONG? FROM (MONTH/YEAR) \_\_\_\_\_ TO \_\_\_\_\_ LAST RENT PAID (MONTH) \_\_\_\_\_ AMT. \$ \_\_\_\_\_

OWNER/MANAGER \_\_\_\_\_ TEL \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_

STREET UNIT# CITY STATE ZIP  
HOW LONG? FROM (MONTH/YEAR) \_\_\_\_\_ TO \_\_\_\_\_ LAST RENT PAID (MONTH) \_\_\_\_\_ AMT. \$ \_\_\_\_\_

OWNER/MANAGER \_\_\_\_\_ TEL \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

**SECOND PREVIOUS**

ADDRESS \_\_\_\_\_

STREET UNIT# CITY STATE ZIP  
HOW LONG? FROM (MONTH/YEAR) \_\_\_\_\_ TO \_\_\_\_\_ LAST RENT PAID (MONTH) \_\_\_\_\_ AMT. \$ \_\_\_\_\_

OWNER/MANAGER \_\_\_\_\_ TEL \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

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**EMPLOYMENT & INCOME**

**CURRENT**  
EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_

POSITION \_\_\_\_\_ OVERALL INCOME \$ \_\_\_\_\_ per \_\_\_\_\_

SUPERVISOR \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

PHONE \_\_\_\_\_ NUMBER TO CONFIRM EMPLOYMENT \_\_\_\_\_

OTHER POSSIBLE INCOME \$ \_\_\_\_\_ PER \_\_\_\_\_ PROVIDER \_\_\_\_\_

**PREVIOUS**  
EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_

POSITION \_\_\_\_\_ OVERALL INCOME \$ \_\_\_\_\_ per \_\_\_\_\_

SUPERVISOR \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

PHONE \_\_\_\_\_ NUMBER TO CONFIRM EMPLOYMENT \_\_\_\_\_

OTHER POSSIBLE INCOME \$ \_\_\_\_\_ PER \_\_\_\_\_ PROVIDER \_\_\_\_\_

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**CREDIT INFORMATION**

NAME OF CREDITOR \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_ MONTHLY PAYMENT \_\_\_\_\_ BALANCE DUE \_\_\_\_\_

NAME OF CREDITOR \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_ MONTHLY PAYMENT \_\_\_\_\_ BALANCE DUE \_\_\_\_\_

NAME OF BANK/BRANCH \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_ TYPE OF ACCOUNT \_\_\_\_\_ ACCOUNT BALANCE \_\_\_\_\_

NAME OF BANK/BRANCH \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_ TYPE OF ACCOUNT \_\_\_\_\_ ACCOUNT BALANCE \_\_\_\_\_

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**REFERENCES**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ KNOW FOR \_\_\_\_\_ OCCUPATION \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ KNOW FOR \_\_\_\_\_ OCCUPATION \_\_\_\_\_

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**CLOSEST RELATIVES**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

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**SIGNATURE**

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

(Applicant authorizes verification of the above items, but not limited to, the obtaining of a credit report, and agrees to furnish additional credit references upon request. Applicant to allow Owner / Agent to disclose tenancy information to previous or subsequent Owner / Agents.)