

Studios Inn

348 S. Clover Ave., San Jose, CA 95128

APPLICATION FOR RENTAL

APPLICANT INFORMATION						
LAST NAME		FIRST NAME	M.I	SSN	DRIVER'S LICENSE #	
BIRTH DATE		PHONE ()HM ()CELL ()WK		PHONE ()HM ()CELL ()WK		EMAIL
CURRENT ADDRESS						
STREET ADDRESS			CITY	STATE	ZIP	
HOW LONG						
OTHER OCCUPANTS						
NAMES OF ADDITIONAL OCCUPANTS & RELATION						
EMPLOYMENT & INCOME INFORMATION						
OCCUPATION		EMPLOYER/COMPANY		MONTHLY SALARY \$		
SUPERVISOR NAME		SUPERVISOR PHONE		START DATE	END DATE	
OTHER INCOME DESCRIPTION				MONTHLY INCOME \$		
EMERGENCY CONTACTS & REFERENCE						
NAME		ADDRESS		PHONE	RELATIONSHIP	
NAME		ADDRESS		PHONE	RELATIONSHIP	
VEHICLE INFORMATION						
MAKE & MODEL			YEAR	LICENSE NO. & STATE		
MAKE & MODEL			YEAR	LICENSE NO. & STATE		
BACKGROUND INFORMATION						
Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you ever been evicted from a tenancy? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever: Been convicted of a crime? If yes, please provide Type of Offense, County, & State						

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the 1st day of each month/week in advance. I warrant that all statements above set forth are true. I hereby give my permission to communicate with my current and former landlord or property manager for the purpose of discussing any and all of the facts and circumstances of my current or former tenancy, as well as the other information listed above. I also give my permission to communicate with my current employer(s) and/or supervisor(s) for the purpose of verifying employment information listed above. I understand there are no limitations or restrictions regarding what may be discussed or revealed. I am aware that a credit history, eviction search and criminal background check will be done in conjunction with my application. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

(Signed/Applicant)

Date