

FUTRELL-SIEVERT LIMITED PARTNERSHIP

RESIDENTIAL RENTAL APPLICATION

Applicant's Information

Full Name _____
 Social Security Number _____
 Driver's License Number _____ State _____
 Date of birth _____
 Home Telephone No. _____
 Work Telephone No. _____
 E-mail Address _____
 Do you have any pets? Yes / No
 Do you have any water filled furniture: Yes / No
 Does any member of the household smoke? Yes / No
 Why are you vacating your present residence?

 On what date would you prefer to move in? _____

Apartment or residence applied for:

Complex name Downtown Apartments
 Property address 431 Beaver Street
 City, State, Zip Code Santa Rosa, California 95404
 No. of bedrooms _____ baths _____ Apartment _____

Resident Manager or Leasing Agent

Name Jenelle Cater
 Telephone No. 707-527-4006
 Fax No. 707-568-3457

PLEASE NOTE: All persons over the age of 17 listed in the next section below as a household member or co-applicant must complete a separate rental application.

Additional Household Members or Co-Applicants

Full Name	Date of Birth	Social Security Number	Relationship to the Primary Applicant
_____	____/____/____	____/____/____	_____
_____	____/____/____	____/____/____	_____
_____	____/____/____	____/____/____	_____
_____	____/____/____	____/____/____	_____

Applicant Information

Present Address

Street _____ Apt # _____
 City / State / Zip _____
 Owner / Manager's Name _____
 Telephone No. _____
 Monthly Rent \$ _____
 Occupancy Dates: In _____ Out _____
 Does the landlord listed above own the property? Yes / No
 Does the landlord listed above reside with you? Yes / No
 What is your relationship to the landlord above (circle one)
 None Parent Relative Friend Room-Mate

Verification of Information (for office use only)

Present Address Verification (for office use only)

Was the rent paid on time? Yes / No
 Was a majority of the security deposit refunded? Yes / No
 Was 30-day notice given? Yes / No
 Was the apartment left in good condition? Yes / No
 Would this landlord rent to this applicant again? Yes / No
 Did landlord have any problems or complaints? Yes / No
 Verified by _____
 Comments _____

First Prior Address

Street _____ Apt # _____
 City / State / Zip _____
 Owner / Manager's Name _____
 Telephone No. _____
 Monthly Rent \$ _____
 Occupancy Dates: In _____ Out _____
 Does the landlord listed above own the property? Yes / No
 Does the landlord listed above reside with you? Yes / No
 What is your relationship to the landlord above (circle one)
 None Parent Relative Friend Room-Mate

First Prior Address Verification (for office use only)

Was the rent paid on time? Yes / No
 Was a majority of the security deposit refunded? Yes / No
 Was 30-day notice given? Yes / No
 Was the apartment left in good condition? Yes / No
 Would this landlord rent to this applicant again? Yes / No
 Did landlord have any problems or complaints? Yes / No
 Verified by _____
 Comments _____

Second Prior Address

Street _____ Apt # _____
 City / State / Zip _____
 Owner / Manager's Name _____
 Telephone No. _____
 Monthly Rent \$ _____
 Occupancy Dates: In _____ Out _____
 Does the landlord listed above own the property? Yes / No
 Does the landlord listed above reside with you? Yes / No
 What is your relationship to the landlord above (circle one)
 None Parent Relative Friend Room-Mate

Second Prior Address Verification (for office use only)

Was the rent paid on time? Yes / No
 Was a majority of the security deposit refunded? Yes / No
 Was 30-day notice given? Yes / No
 Was the apartment left in good condition? Yes / No
 Would this landlord rent to this applicant again? Yes / No
 Did landlord have any problems or complaints? Yes / No
 Verified by _____
 Comments _____

Equal Housing Opportunity: We encourage and support the affirmative action housing program barring housing discrimination due to race, ethnic heritage, national origin, religion, sex or sexual orientation, handicap or familial status.

Applicant Information

Current Occupation

Company Name _____
Address _____ Suite No. _____
City / State / Zip _____
Telephone No. _____
Fax No. _____
Job Title _____
Job Description _____
Supervisor's Name _____
Length of employment: _____ years _____ months
Estimated gross monthly income before taxes \$ _____
Are you self employed? _____ Yes / No

Previous Occupation

Company Name _____
Address _____ Suite No. _____
City / State / Zip _____
Telephone No. _____
Fax No. _____
Length of employment: _____ years _____ months
Estimated gross monthly income before taxes \$ _____

Additional Sources of Income

Description _____
Paid by _____
Address _____ Suite No. _____
City / State / Zip _____
Telephone No. _____
Fax No. _____
Estimated gross monthly income before taxes \$ _____

Bank Information

Name of Bank _____
Address _____
City / State / Zip _____

Name of Bank _____
Address _____
City / State / Zip _____

Credit References

Name of lender _____
Approximate balance _____ Paid / mo. \$ _____

Name of lender _____
Approximate balance _____ Paid / mo. \$ _____

Personal References

Name _____
Address _____

Name _____
Address _____

In Case of Emergency Notify

Name _____
Address _____

Motor Vehicles

Make _____ Model _____ Yr _____ License No. _____

Have you ever been evicted for any reason? _____ Yes / No
Have you ever withheld rent when due? _____ Yes / No

Verification of Information (for office use only)

Current Occupation Verification (for office use only)

Length of employment verified as _____ yrs _____ months _____
Applicant's work hours are (circle one) _____ full-time / part-time
Income verified as _____
Is the applicant still in a probationary period? _____ Yes / No
Is the applicant's job performance satisfactory? _____ Yes / No
Will the applicant's job position continue next year? _____ Yes / No
Verified by _____
Comments _____

Previous Occupation Verification (for office use only)

length of employment verified as _____ yrs _____ months
Applicant's work hours are (circle one) _____ full-time / part-time
Income verified as _____
Verified by _____
Comments _____

Additional Income Sources Verification (for office use only)

Verified by _____
Comments _____

Telephone _____ Fax _____
Account No. _____
Type of Account (circle one) _____ checking _____ savings _____ other _____

Telephone _____ Fax _____
Account No. _____
Type of Account (circle one) _____ checking _____ savings _____ other _____

Account No. _____
Account Type (circle one) _____ credit card _____ mortgage _____ other _____

Account No. _____
Account Type (circle one) _____ credit card _____ mortgage _____ other _____

Telephone _____ Fax _____
Length of acquaintance _____ yrs _____ months

Telephone _____ Fax _____
Length of acquaintance _____ yrs _____ months

Telephone _____ Fax _____
Relationship to applicant _____

Make _____ Model _____ Yr _____ License No. _____

Have you ever filed bankruptcy? _____ Yes / No
Have you ever been convicted of a felony _____ Yes / No

I the undersigned applicant represent that all of the above information is true and correct to the best of my knowledge. I hereby authorize Futrell-Sievert Limited Partnership or it's Agents to investigate and verify the above information by any reasonable means, including but not limited to, obtaining a consumer and / or investigative credit report.

Applicant's Signature _____ Date _____

The Downtown Apartments

Futrell-Sievert LP

431 Beaver St Santa Rosa, CA 95404

Rental Policies and Procedures

Once you have selected a rental, each adult household member (age 17 and over) must complete, sign and return a Rental Application Form.

*There is a **\$35 non-refundable application fee per application** which covers the cost of processing your application and obtaining your credit report. Application fees must be paid by money order or cashier's check payable to **The Downtown Apartments**. Sorry no cash or personal checks.*

1. **COMPLETE APPLICATION** –

The application must be completed in its entirety. Incomplete or illegible applications may delay processing or result in denial of application. Applications are processed in the order received. Processing may take 3-5 business days.

2. **SUFFICIENT INCOME AND EMPLOYMENT HISTORY** –

We require 4 years of employment history, or your 3 most recent positions, whichever is greater, disclosed on the rental application. Current, permanent employment of at least 12 months is desired for each employed adult applicant, with a total monthly income equal to or greater than 2 times the monthly rental amount. 3 months of paystubs and 3 months of bank statements for all assets are required at the time your application is approved.

3. **VERIFIABLE GOOD CREDIT** –

Credit reports will be checked with a national credit bureau. Report must show no evictions within the last 4 years and no collection accounts for utilities.

4. **GOOD RENTAL HISTORY** –

We require 4 years' tenancy history, or your two most recent residences, whichever is greater. We will make reasonable efforts to contact present and prior landlord(s) and/ or mortgage holder(s) submitted by Applicant. FSLP reserves the right to decline tenancy on the basis of our inability to verify any references.

FSLP, in their sole discretion, may qualify applicants not meeting all requirements listed above, with the inclusion of a higher security deposit and/ or the commitment of a co-signer/ Third Party Guarantor. Incomplete or falsified applications may be rejected without further notice or grounds for immediate termination of a lease, should false information be found at a future date. All applications submitted become property of FSLP or its subsidiaries. FSLP cannot guarantee any unit you have seen to be available by the time your application is processed. Dwelling units are rented to the first approved applicant who has paid the required "Good Faith Deposit" to hold. A "Good Faith Deposit" will not be accepted until the Rental Application is approved. All deposits and move-in obligation payments must be made by cashier's check or money order only.