

MIDVALE, LLC
12655 WASHINGTON BLVD., SUITE 203
LOS ANGELES, CA 90066
TEL: (310) 391-1076
FAX: (310) 391-8859
WWW.WESTSIDEPLACES.COM

APPLICANT *Each Applicant over the age of 18 must complete their own application form*

PLEASE PRINT

| | | | |
|---------------------------------------|---------------|-------------------|--------------------|
| First, Middle, Last Name | Date of Birth | Social Security # | Driver's License # |
| Other Names Used In the Last 10 Years | Home Phone | Cell Phone | Email Address |
| | | | |

ADDITIONAL OCCUPANTS *List everyone who will live with you:*

| | | |
|--------------------------|---------------|---------------------------|
| First, Middle, Last Name | Date of Birth | Relationship To Applicant |
| | | |
| | | |

EMPLOYMENT

| | Current Employment | Prior Employment |
|---------------------|----------------------|----------------------|
| Employer | | |
| Address | | |
| Employer Phone | | |
| Job Title | | |
| Name of Supervisor | | |
| Dates of Employment | From: To: | From: To: |
| Income Per Month | \$ | \$ |

RESIDENCE

| | Current Residence | Previous Residence | Previous Residence |
|--------------------------------------|-------------------|--------------------|--------------------|
| Street Address | | | |
| City | | | |
| State & Zip | | | |
| Dates of Stay | | | |
| Owner/Manager And Phone number | | | |
| Reason For Leaving | | | |
| Last Rent Paid | \$ | \$ | \$ |

VEHICLES

| Automobiles | Make | Model | Color | Year | License No. |
|-------------|------|-------|-------|------|-------------|
| | | | | | |
| | | | | | |
| Motorcycles | | | | | |

PERSONAL REFERENCES

| In Case Of Emergency, Notify | Address/City | Phone | Relationship |
|-----------------------------------|--------------|-------|--------------|
| Close Friend | | | |
| | | | |
| Nearest Relative Living Elsewhere | | | |
| | | | |

CREDIT INFORMATION Please list all your financial obligations

| Name of Bank or Savings & Loan | | Branch or Address | | Account No. | Balance |
|--------------------------------|-------------|-------------------|-------|-------------|-------------|
| | | | | Checking | \$ |
| | | | | Savings | \$ |
| Credit Accounts | Account No. | Address/City | Phone | Balance | Due Monthly |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

GENERAL INFORMATION Check answer that applies

- Do you smoke? NO YES
- Do you have any pets? NO YES
- Have you ever filed for bankruptcy? NO YES
- Do you have any musical instruments? NO YES
- Do you have any water-filled furniture or do you intend to use water filled furniture in the apartment? NO YES
- Have you ever been convicted for selling, possessing, distributing or manufacturing illegal drugs or convicted of any other crime? NO YES
- Have you ever been evicted for non-payment of rent or any other reason? NO YES

Please explain any "yes" answers to the above questions:

Why are you leaving your current residence? _____

The applicant hereby applies to rent/lease Apartment # _____ at 3670 Midvale AVE, LOS ANGELES, CA 90034 for \$ _____ per month, and upon owner's approval agrees to enter into a Rental Agreement and/or Lease and pay all rent and security deposits required before occupancy.

An application fee of \$ _____ is hereby submitted for the cost of processing this application, to obtain credit history and other background information.

Applicant represents that all information given on this application is true and correct. Applicant hereby authorizes verification of all references and facts, including but not limited to current and previous landlords and employers, and personal references. Applicant hereby authorizes owner/agent to obtain Unlawful Detainer, Credit Reports, Telechecks, and/or criminal background reports. Applicant agrees to furnish additional credit and/or personal references upon request. Applicant understands that incomplete or incorrect information provided in the application may cause a delay in processing which may result in denial of tenancy. Applicant hereby waives any claim and releases from liability any person providing or obtaining said verification or additional information.

Applicant: _____ Date: _____
 (Signature required)