



404 S. Auburn St. Grass Valley CA, 95945 - P.O. BOX 1017- (530)272-1631- Fax (530)273-7805-E-mail info@mvalleypm.com

ANYONE 18 AND OVER MUST FILL OUT A SEPARATE APPLICATION

1. APPLICANT REQUIREMENTS:

A. Good credit rating.

- **D.** Good Rental history (1 Current and 1 Prior OR last 3 years)
- **B.** Verifiable income. **E. 3X** Rental Income.
- C. 3 Months of check stubs AND 3 months Bank Statements. F. Copy of DL or ID
- 2. DECISION PROCESS IS AS FOLLOWS:
 - **A.** All applications are forwarded to Management for decision.
 - **B.** In most cases, the property owner reserves the right to make the final decision.
 - **C.** Once the decision has been made, all applicants will be notified of the results.
 - **D.** Because of strong demand for rentals, we will accept multiple applications for the same property.
- 3. THE APPLICATION PROCESSING FEE IS FOR THE COST OF (but not limited to) THE FOLLOWING:
 - A. Review of the application for completeness.
 - **B.** Verification of current and previous landlord references.
 - **C.** Verification of current employer, references or other source of income.
 - D. Cost to obtain credit rating, unlawful detainer (eviction) search and/or other screening reports.
- 4. THE APPLICATION-PROCESSING FEE IS NON-REFUNDABLE, EVEN IF THE APPLICATION TO RENT IS DECLINED. IT IS NOT A DEPOSIT OR RENT, AND WILL NOT BE APPLIED TO FUTURE RENT OR SECURITY DEPOSIT.

THE APPLICATION MUST BE COMPLETE OR IT CANNOT BE PROCESSED.

<u>Please allow 3-5 Business days to process your application</u>. An incomplete application will cause a delay or even a denial. Be sure you provide **ALL** and **CORRECT** information that is requested, Name's, phone numbers, ext. <u>For self-employed and retired applicants</u>, you must provide proof of income. We do not accept original documents. Please provide us with copies and attach them to your application.

Applicant represents that all statements are true and correct and hereby authorizes verification of all information listed on this application, including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request. Applicant consents to allow Owner/Agent to disclose tenancy information to previous or subsequent Owners/Agents.

\$25.00 Charge for returned check per CC section 1719 1-1-97

RECEIPT FOR TENANT SCREENING AND/OR CREDIT CHECKING FEES											
Date:		Verified Photo	o ID or D/L:	Verified other ID:							
Received From:											
Dollars: \$	Cash?	Check?	Money order?	Ву:							

APPLICATION TO RENT

(All sections must be comple	ted)	(Individua	al applications required	from eac	ch occupar	nt 18 years	s of age or	older) (Ple	ase print clearl	y for faster proce	ssing)	
First Name:	Middle:			Last:				Home #				
Other names used in the last 10 years:									Mobile #			
Email:									Work #			
ARE YOU APPLYING AS A COSIGNER? (COSIGNERS ARE ONLY ACCEPTED FOR CREDIT SCORE)										NO		
ARE YOU APPLYING AS	S A COSIGN	IER?	•		ACCEPT	ED FOR	R CREDI	T SCORE)	YES?	NO?	,	
Present Address: City: State: Zip:												
Resided From: Resided To:):			Reason for Leaving:				, .			
Landlord Name:			Landlord Phone#		Landlord Em			dlord Email:	il:			
2.												
Prior Address:			City:							Zip:		
Resided From:	f From: Resided To:		Monthly Rent:		Reason for leaving?							
Landlords Name:		Laı	Landlords Phone#		Landlords Ema			dlords Email:	1:			
3.												
Next Prior Address (IF APPL		City			7:			tate:	Zip:			
Resided From:	From: Resided To:				Reason for Leaving?							
Landlords Name:		Laı	ndlords Phone#				Lan	dlords Email:				
				SONAL	INFORI							
Date of Birth:		Social Sec)/DL#:			Issuing Stat	e:	
Employer: Employer Phone#												
Employer Address:						1 -	<u> </u>					
Monthly Income:		Position:						Years Worked:				
Supervisor's Name:		Supervisor's Title:			Superviso			r's Email:				
*					NAL INC	COME		-				
Income:		Source:				Emplo	yers Pho	one #				
	·			DEPE	ENDANT	S						
First:		Last:	Last:			Relation:			D.O.B.			
First:		Last:	Last:			Relation:			D.O.B.			
First:	First:		Last:			Relation:			D.O.B.			
				I	PETS							
Name:	Breed:	Breed:			Weight:			Age:				
Name:		Breed:		Weight:				Age:				
Name:		Breed:	Breed:			Weight:			Age:			
			RE THAN 2 VEHIC						R WITH INF	ORMATION.		
How many vehicles do the same Vehicle inform			rith a pink slip. Mo	torcycl	es etc.?	Attach a	dditiona	al paper with	#of Vehic	eles:		
Make: M		Model:			Year:		Lic. Plate#		State:			
Make: M		Model:			Year:		Lic. Plate#:		State:			
EMERGENCY CONTACT												
Contact Name: Contact Name:												
Phone# Relationship:					Phone# Relationship:							
Address: Address:												
Have you ever been a defendant in an unlawful detainer (eviction) Lawsuit or defaulted (Failed to Perform) any Yes? No?											No?	
obligation of a rental ag			·42							Yes?	No?	
, o											No?	

I/WE DECLARE THAT THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I/WE Understand that Mountain Valley Property Management, Inc. and Nevada County Rentals will retain this application whether or not it is approved. I/WE AUTHORIZE MOUNTAIN VALLEY PROPERTY MANAGEMENT, INC. AND NEVADA COUNTY RENTALS TO VERIFY ALL INFORMATION CONTAINED IN THIS APPLICATION, INCLUDING OBTAINING A CREDIT REPORT, LANDLORD RATING, EMPLOYMENT HISTORY AND BANK RATING. I/WE further understand that any representation above that proves to be false will cause the applicant to be denied and will immediately terminate any agreement entered to which the landlord has detrimentally relied. Consent to the use of the above information was voluntary, known and given with no restrictions. Applicant consents to allow Owner/Agent to disclose tenancy information to previous or subsequent Owners/Agent

A Licensed California Real Estate Broker, Lic. #01904408