

LEXINGTON *Properties* APPLICATION TO RENT

Address of Property Desired: _____ Rent: _____ Deposit: _____ Move-In Date: _____

How did you hear about this property? Sign Sacramento Bee Homes For Rent Other

Last Name:	First Name:	Middle Initial:
Hm Phone#:	Wk Phone:	Birth Date: / /
Social Sec #:	Drivers Lic#:	State: Expires:

Present Address:	City:	State:	Zip:
Owners Name:	Owner Phone#	From / /	To / /
Current Rental Amount: \$	Reason for Leaving?:		

Previous Address:	City:	State:	Zip:
Owners Name:	Owner Phone#	From / /	To / /
Current Rental Amount: \$	Reason for Leaving?:		

Previous Address:	City:	State:	Zip:
Owners Name:	Owner Phone#	From / /	To / /
Current Rental Amount: \$	Reason for Leaving?:		

How Many Proposed Occupants including Yourself _____ **** (Anyone over the age of 18 must fill out an application.) ****

NAME	AGE	NAME	AGE

Present Employer:	Employer Address:
Employer Phone#:	Supervisor Name:
Length of Employment:	Your Position/Title:
Gross Income: \$ / per month	Other Income: \$ Source:

Previous Employer:	Employer Address:
Employer Phone#:	Supervisor's Name:
Length of Employment:	Your Position/Title:
Gross Income: \$ / per month	Other Income: \$ Source:

BANK NAME	BRANCH	ACCOUNT #	CHECKING OR SAVINGS

Will you have pets? Yes No How Many? _____ Type: _____ Breed: _____ Wt: _____
 Have you ever filed bankruptcy? Yes No Explain: _____
 Have you ever been evicted? Yes No
 Does anyone in your household smoke? Yes No
 Do you intend on using liquid filled furniture? Yes No If yes, you must provide us with a copy of your insurance policy.

Call in case of Emergency:	Ph#:	Relationship:
Call in case of Emergency:	Ph#:	Relationship:

AUTOMOBILE MAKE	MODEL	YEAR	LICENSE #

Applicant represents that all statements are true and correct. Applicant authorizes verification of all information on this application, including but not limited to obtaining a credit report, investigation of financial responsibility and general character. Applicant agrees to provide additional information as requested. Should Lexington Property Management be unable to verify any of the information on the application, the application may be rejected.

APPLICANT SIGNATURE: _____ **DATE:** _____

Please read the following and sign below.

- I understand that the first month's rent must be paid by cashier's check or money order only; cash will not be accepted.
- To reserve this unit for your occupancy, the security deposit of \$ _____ must be paid within twenty-four (24) hours of approval of this application. The security deposit must be paid by cashier's check or money order.
- I will move in on or before _____.
- An application fee of \$30.00 (cash or money order) must be submitted with each application.
- A valid photo ID is required of all applicants and copies of ID's must be submitted with application.
- All income must be verifiable with supporting documentation submitted with application.
- Each person 18 years of age or over must personally fill out, sign and deliver this application to Lexington Properties.
- A 12-month lease will usually be required; if this does not fit your plans, ask about it.
- Filling in all blanks permits us to process your application faster. Where a question does not apply, please write "none" or "N/A", as needed. Please allow 3 to 4 business days for the application to be processed.
- Applicant represents that all statements on this application are true and correct. Applicant authorizes verification of all information on this application. Should Lexington be unable to verify all information on the application, the application may be rejected.
- This application is the property of Lexington Property Management.
- Applicant has read and agrees to the above:

Applicant's Signature

Date



FOR OFFICE USE ONLY:

Date Received _____ Time Received _____ Type of ID: Driver's License California ID Military ID

 Other _____ Application fee amount received \$ _____ Cash _____ Money Order
 Received by _____