

APPLICATION TO RENT



RETURN APPLICATION TO:
INFO@FARALLONPROPERTIES.COM OR FAX (415) 467-0991

- FIRST APPLICANT -	- SECOND APPLICANT (IF ANY) -
PERSONAL INFORMATION - PLEASE PRINT CLEARLY	PERSONAL INFORMATION - PLEASE PRINT CLEARLY
NAME (Last, First, Middle) _____	NAME (Last, First, Middle) _____
SOCIAL SECURITY# _____ - _____ - _____	SOCIAL SECURITY# _____ - _____ - _____
DATE OF BIRTH: ____ / ____ / _____	DATE OF BIRTH: ____ / ____ / _____
PHONE (____) _____ - _____	PHONE (____) _____ - _____
E-MAIL ADDRESS: _____	E-MAIL ADDRESS: _____
CURRENT ADDRESS-	CURRENT ADDRESS-
_____ CITY/ STATE/ ZIP: _____	_____ CITY/ STATE/ ZIP: _____
RENTED OR OWNED? _____ HOW LONG?: _____	RENTED OR OWNED? _____ HOW LONG?: _____
NAME & PHONE # OF LANDLORD OR MANAGER: _____	NAME & PHONE # OF LANDLORD OR MANAGER: _____
REASON FOR LEAVING: _____	REASON FOR LEAVING: _____
PREVIOUS ADDRESS-	PREVIOUS ADDRESS-
_____ CITY/ STATE/ ZIP: _____	_____ CITY/ STATE/ ZIP: _____
RENTED OR OWNED? _____ HOW LONG?: _____	RENTED OR OWNED? _____ HOW LONG?: _____
NAME & PHONE # OF LANDLORD OR MANAGER: _____	NAME & PHONE # OF LANDLORD OR MANAGER: _____
REASON FOR LEAVING: _____	REASON FOR LEAVING: _____
EMPLOYMENT INFORMATION-	EMPLOYMENT INFORMATION-
EMPLOYER: _____	EMPLOYER: _____
POSITION: _____	POSITION: _____
HOW LONG? _____ MONTHLY EARNINGS\$ _____	HOW LONG? _____ MONTHLY INCOME \$ _____
NAME & PHONE # OF SUPERVISOR: _____	NAME & PHONE # OF SUPERVISOR: _____
ADDITIONAL INCOME?(source, amount) _____	ADDITIONAL INCOME?(source, amount) _____
TOTAL MONTHLY INCOME: \$ _____	TOTAL MONTHLY INCOME: \$ _____
BACKGROUND INFORMATION-(Circle To Answer All Questions)	BACKGROUND INFORMATION-(Circle To Answer All Questions)
HAVE YOU EVER FILED FOR BANKRUPTCY?.....YES / NO	HAVE YOU EVER FILED FOR BANKRUPTCY?.....YES / NO
HAVE YOU EVER BEEN EVICTED OR SUED BY A LANDLORD FOR NON-PAYMENT OF RENT OR PROPERTY DAMAGE?.....YES / NO	HAVE YOU EVER BEEN EVICTED OR SUED BY A LANDLORD FOR NON-PAYMENT OF RENT OR PROPERTY DAMAGE?.....YES / NO
HAVE YOU EVER BEEN CONVICTED OF SELLING, DISTRIBUTING, OR MANUFACTURING ILLEGAL DRUGS?.....YES / NO	HAVE YOU EVER BEEN CONVICTED OF SELLING, DISTRIBUTING, OR MANUFACTURING ILLEGAL DRUGS?.....YES / NO
IDENTITY VERIFICATION-	IDENTITY VERIFICATION-
DRIVER'S LICENSE # _____ STATE _____	DRIVER'S LICENSE # _____ STATE _____
NO DL? LIST OTHER ID #: _____	NO DL? LIST OTHER ID #: _____
VEHICLE INFORMATION-	VEHICLE INFORMATION-
MAKE _____ MODEL _____ PLATE # _____	MAKE _____ MODEL _____ PLATE # _____
IN CASE OF EMERGENCY, PLEASE CONTACT-	IN CASE OF EMERGENCY, PLEASE CONTACT-
NAME / PHONE NUMBER(S) / RELATIONSHIP _____	NAME / PHONE NUMBER(S) / RELATIONSHIP _____

By signing below applicant represents that all the above statements are true and correct and hereby authorizes verification of the above items, including, but not limited to, the obtaining of a credit report. The landlords or property managers stated above are hereby authorized to communicate with the prospective landlord, property manager, leasing broker and tenant screening agency for the purpose of discussing any and all of the facts and circumstances of the applicant's current or former tenancy. Additionally applicant hereby authorizes verification of employment and authorizes the above named employer to release all information relevant to verification of applicant's employment and earnings. There are no limitations or restrictions on what may be discussed or revealed to the prospective landlord, property manager, leasing broker and tenant screening agency. The applicant also gives permission for the prospective landlord, property manager, leasing broker, and tenant screening agency to obtain copies of applicant's entire tenancy file from previous landlords and property managers. The applicant hereby holds the above named parties free and harmless from any liability related to the information contained herein or obtained with this information or any disclosure of the information contained herein.

X _____
APPLICANT #1 - SIGNATURE **DATE**

X _____
APPLICANT #2 - SIGNATURE **DATE**