McKeever Real Estate Phone: (209)691-3283 Fax: (650)719-0393

<u>RENTAL APPLICATION</u> Submit to: <u>mckeeverrealestate@gmail.com</u> or fax

Today's Date:	Date of anticipated move in:				
Property address:					
Applicant Monthly	Monthly rent \$ Security deposit:				
	(work):				
D.O.B//	Social Security#: Email:				
Applicant's employment:					
Name of present employer Address					
Position	Date started Monthly income				
Supervisor's name	phone				
Name of previous employer	r				
Address	Data started Monthly in some				
Position	Date startedMonthly income				
Supervisor's name	phone				
Other sources of income					
Spouse/Co-Applicant:					
Full name of spouse					
Present Address					
	(work)				
D.O.B. / /	Social Security # Email:				
Spouse's/Co-applicant em	ployment:				
Name of present employer					
Address					
Position	Date started Monthly income				
Supervisor's name Present Landlord or mort	gage company				
Present Landlord or mortga	ge company				

Telephone number (home)		<u>(wor</u> k)	
Monthly rent or mortgage payment		Date of move-in	Date of move-out
Previous Landlord or mortgage co	mpany		
Previous Landlord or mortgage comp	oany		
Telephone number (home)		(work)	
Monthly rent or mortgage payment		Date of move-in	Date of move-out
Personal References			
Name		phone ()
In case of emergency contact Relationship		phone	
<u>Occupants</u> List all occupants			
List any pets: type	breed	weight	age
Vehicles List vehicles to be parked at premise	s:		,
	make	model	year
the occupants listed above ever been	: convicted o	f a felony?	Have any of
Been evicted? Broker	a lease?	Declared bankruptcy	,
authorizes the National Association of obtain credit reports on the above lis false information Landlord is entitled Landlord's time and expenses in pro application fee in the amount of <u>\$2</u>	of Independer ted applicant l to reject the cessing this a	nt Landlords to verify all of the i and/or applicant's. If applicant application, and retain all applic pplication. Applicant shall give	or applicant's spouse has given any cation fees as liquidated damages for
Signature of applicant		Date	

Signature of Spouse/Co-Applicant	Date