



40915 Sierra Dr (P O Box 900)  
Three Rivers CA. 93271

Property Management

(559) 561-2200  
Fax 561-2300

\$15.00 Application Fee per person over 18 years of age (Visa & MC Accepted)

Please print Clearly

1. Applicant Name \_\_\_\_\_ Social Security# \_\_\_\_\_

2. Applicant Name \_\_\_\_\_ Social Security# \_\_\_\_\_

Phone # \_\_\_\_\_

3. Present Address: \_\_\_\_\_ How long have you lived there? \_\_\_\_\_ yr \_\_\_\_\_ mths

\_\_\_\_\_

4. Does any proposed tenant smoke?    yes    no    ( circle one)

5. Present Landlord \_\_\_\_\_ Phone \_\_\_\_\_

Landlord Address \_\_\_\_\_

6. Names of all individuals who will be occupying premises: ( No others may live there without Managers Approval )

\_\_\_\_\_ Birth date \_\_\_\_\_

\_\_\_\_\_ Birth date \_\_\_\_\_

\_\_\_\_\_ Birth date \_\_\_\_\_

\_\_\_\_\_ Birth date \_\_\_\_\_

7. Present Employer \_\_\_\_\_ Phone# \_\_\_\_\_

Employer address \_\_\_\_\_

Occupation \_\_\_\_\_ Position \_\_\_\_\_

Length of Employment \_\_\_\_\_ Monthly Income \_\_\_\_\_

Occupation \_\_\_\_\_ Position \_\_\_\_\_

Length of Employment \_\_\_\_\_ Monthly Income \_\_\_\_\_

8. Automobile: Make/Model \_\_\_\_\_ Year \_\_\_\_\_ Driver Lic # \_\_\_\_\_

9. In Case of Emergency notify: \_\_\_\_\_ Relationship \_\_\_\_\_

Phone # \_\_\_\_\_ Address \_\_\_\_\_

Signature of Applicant **X** \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant **X** \_\_\_\_\_ Date \_\_\_\_\_

I certify that the above information is true and complete. I authorize the verification of this information by contacting any or all individuals and financial institution. I understand that this is not a lease or and offer to rent. No binding obligation of any kind exists between the owner and me. NO PERSON SHALL BE DENIED THE RIGHT TO RENT OUR PROPERTY BECAUSE OF THEIR RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN OR ANCESTRY.