

WST PROPERTIES INC.

RENTAL APPLICATION CHECKLIST

OFFICE:916-926-8000

FAX:916-244-7220

EMAIL: INFO@WSTPROP.COM

BRE LIC #:02017889

ITEMS NEEDED:

2 months of paystubs

2 years w-2s / tax returns

2 months bank statements

Driver's license copy

Social security card copy

Rental application

*Application Fee \$30.00 Dollars Per Applicant (Payment Options-Zelle,
Cash, Check, Money Order, or Paypal)*

*Incomplete Applications will Not Be Processed. Please Allow 48 Hours for a Response. Thank you for the
Opportunity to Earn your Business!*



APPLICATION TO RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 6/18)

I. APPLICATION TO RENT

THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.

1. **Applicant is completing Application as a (check one)** tenant, tenant with co-tenant(s) or guarantor/co-signor.
Total number of applicants _____
2. **PREMISES INFORMATION**
Application to rent property at _____ ("Premises")
Rent: \$ _____ per _____ Proposed move-in date _____
3. **PERSONAL INFORMATION**
 - A. **FULL NAME OF APPLICANT** _____
 - B. Date of Birth _____ (For purpose of obtaining credit reports. Age discrimination is prohibited by law.)
 - C. 1. Driver's License No. _____ State _____ Expires _____
2. See section II, 2 for Social Security Number/Tax Identification Numbers. Such number shall be provided upon request from Landlord/Manager/Agent.
 - D. Phone number: Home _____ Work _____ Other _____
 - E. Email _____
 - F. Name(s) of all other proposed occupant(s) and relationship to applicant _____
 - G. Pet(s)(Other than service or companion animals) (number and type) _____
 - H. Auto: Make _____ Model _____ Year _____ License No. _____ State _____ Color _____
Other vehicle(s): _____
 - I. In case of emergency, person to notify _____
Relationship _____
Address _____ Phone _____
 - J. Does applicant or any proposed occupant plan to use liquid-filled furniture? No Yes Type _____
 - K. Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years? No Yes
If yes, explain _____
 - L. Has applicant or any proposed occupant ever been asked to move out of a residence? No Yes
If yes, explain _____
 - M. Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony? No Yes
If yes, explain _____
(After completing a credit review, Landlord may consider the nature of the felony and the length of time since it occurred.)

4. RESIDENCE HISTORY

Current address _____
City/State/Zip _____
From _____ to _____
Name of Landlord/Manager _____
Landlord/Manager's phone _____
Do you own this property? No Yes
Reason for leaving current address _____

Previous address _____
City/State/Zip _____
From _____ to _____
Name of Landlord/Manager _____
Landlord/Manager's phone _____
Did you own this property? No Yes
Reason for leaving this address _____

5. EMPLOYMENT AND INCOME HISTORY

Current employer _____
Current employer address _____
From _____ To _____
Supervisor _____
Supervisor phone _____
Employment gross income \$ _____ per _____
Other income info _____

Previous employer _____
Prev. employer address _____
From _____ To _____
Supervisor _____
Supervisor phone _____
Employment gross income \$ _____ per _____
Other income info _____



6. CREDIT INFORMATION

Name of creditor	Account number	Monthly payment	Balance due

Name of bank/branch	Account number	Type of account	Account balance

7. PERSONAL REFERENCES

Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____
 Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____

8. NEAREST RELATIVE(S)

Name _____ Address _____
 Phone _____ Relationship _____
 Name _____ Address _____
 Phone _____ Relationship _____

Applicant understands and agrees that: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; (ii) Landlord or Manager or Agent may receive more than one application for the Premises and, will select the best qualified applicant, and (iii) Applicant will provide a copy of applicant's driver's license or other acceptable identification upon request.

Applicant represents the above information to be true and complete, and hereby authorizes Landlord or Manager or Agent to: (i) verify the information provided; and (ii) obtain a credit report on applicant and other reports, warnings and verifications on and about applicant, which may include, but not be limited to, criminal background checks, reports on unlawful detainers, bad checks, fraud warnings, and employment and tenant history. Applicant further authorizes Landlord or Manager or Agent to disclose information to prior or subsequent owners and/or agents with whom applicant has had, or intends to have, a rental relationship.

If application is not fully completed, or if section II, 2 is applicable and the application is received without the full screening fee: (i) the application will not be processed, and (ii) the application and any portion of the screening fee paid will be returned.

Applicant Signature _____ Date _____ Time _____

Return your completed application and any applicable fee not already paid to: **WST PROPERTIES INC.**
 Address 9586 Blue Thistle Way City Elk Grove State CA Zip 95624

II. SCREENING FEE

THIS SECTION TO BE COMPLETED BY LANDLORD, MANAGER OR AGENT.

1. Applicant will provide screening information and fee directly to Landlord/Manager/Agent's authorized screening service at _____.

OR 2. Applicant has paid a nonrefundable screening fee of \$ _____, applied as follows: (The screening fee may not exceed \$30.00, adjusted annually from 1-1-98 commensurate with the increase in the Consumer Price Index. A CPI inflation calculator is available on the Bureau of Labor Statistics website, www.bls.gov.)

\$ _____ for credit reports prepared by **AMERUSA.NET** _____;
 \$ _____ for _____ (other out-of-pocket expenses); and
 \$ _____ for processing.

Applicant Social Security Number/Tax Identification Number: _____

The undersigned has read the foregoing section regarding the screening fee and acknowledges receipt of a completed copy.

Applicant Signature _____ Date _____

If 2 is selected, the undersigned has has not received the screening fee indicated above.

Landlord or Manager Agent Signature: _____ DRE Lic. # _____
 Date _____

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WST PROPERTIES INC.

RENTAL VERIFICATION

Please complete and return back by fax or email.

Phone: 916-926-8000

Fax: 916-244-7220

Email: psingh@wstprop.com

DRE LIC #: 02017889

This part is to be completed by applying Individual

Name of Applicant _____

I hereby authorize release of the information requested below for my rental address at:

STREET CITY STATE ZIP

Applicant's Signature Date

THIS PART TO BE FILLED OUT BY LANDLORD!

Dates of Residency: _____ through _____

Amount of Rent \$ _____ Has Lease Expired? YES NO

of Late or NSF's none 1 2 3 4 or more

(If 4 or more, did they occur within the last twelve months? YES NO

Has the individual complied with all community policies? YES NO

Does this individual keep an animal on the premises? YES NO

Has the animal at any time caused a problem or been a nuisance? YES NO

Eligible for re-rental YES NO

Date Name and Authority

Signature