



# APPLICATION TO LEASE

The following must be completed in its entirety and verified prior to consideration for occupancy.

**PLEASE PRINT**

For Office Use Only	
Property Name	
Apt. #	Apt. Type
Move-in Date:	Rent:

## PERSONAL INFORMATION

LAST NAME		FIRST NAME		MIDDLE NAME	
Drivers License # & State		Social Security Number		Date of birth.- mm / dd / yyyy over 18? Yes/No	
Current Phone #		Cell phone #		E-mail address	
Names of others who will occupy apartment:					

## RESIDENTIAL HISTORY

Current address (Number, Street, City, Zip)				If apartment, name of complex	
				Dates of Residency	
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	House <input type="checkbox"/>	Apartment <input type="checkbox"/>	Room <input type="checkbox"/>	
To whom do you make payments? Name:				Monthly payment \$	
Address				Phone # ( )	
City		State		Zip	
Previous address (Number, Street, City, Zip)				If apartment, name of complex	
				Dates of Residency	
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	House <input type="checkbox"/>	Apartment <input type="checkbox"/>	Room <input type="checkbox"/>	
To whom did you make payments? Name:				Monthly payment \$	
Address				Phone # ( )	
City		State		Zip	
Have you ever been delinquent in payment of rent? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: _____					
Have you ever been evicted from any property? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: _____					
Have you ever been convicted of, or pleaded no contest to a felony that involved an offense against property, persons, or that involved firearms, illegal drugs or sex or sex crimes? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: _____					
Why are you leaving your present residence? _____					
Have you given notice yet? Yes <input type="checkbox"/> No <input type="checkbox"/>					

## EMPLOYMENT/INCOME

Current Employer		Self Employed <input type="checkbox"/>	Dates of Employment		
Address			From:		
City		State	Zip		
			To:		
Type of business		Position	Income		Annually
			\$		Monthly

Previous Employer		Self Employed <input type="checkbox"/>	Dates of Employment		
Address			From:		
City		State	Zip		
			To:		
Type of business		Position	Income		Annually
			\$		Monthly

Other verifiable income (if needed to qualify)	Description
\$	
\$	
\$	

**FINANCIAL**

Checking: Bank and branch	Acct. #	Balance
		\$
Savings: Bank and branch	Acct. #	Balance
		\$
Other Assets (if needed to qualify)		
Have you ever filed bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when: _____		If yes, date of discharge
County and state where filed: _____		
Have you ever had any suits, liens, judgments, evictions or repossessions?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Describe: _____	County and State : _____	What year? _____
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Describe: _____	County and State : _____	What year? _____
Describe: _____	County and State : _____	What year? _____
Describe: _____	County and State : _____	What year? _____

**CURRENT FINANCIAL OBLIGATIONS (Please list ALL monthly payments)**

Name	Address	Account Type	Amount
			\$
			\$
			\$
			\$
			\$
			\$

**VEHICLES**

How many vehicles do you own? \_\_\_\_\_ Make \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_  
(cars, trucks)

Make \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Make \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Make \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

PARKING OF RECREATION VEHICLES, BOATS, TRAILERS OR COMMERCIAL VEHICLES ON THE PROPERTY IS PROHIBITED UNLESS DESIGNATED AREA IS PROVIDED.

This application is made for the purpose of procuring rental of the herein described premises, and for credit clearance. Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to verify the credit and other information provided by me in this application and to obtain consumer credit reports, investigative consumer reports, and other reports from credit reporting agencies, tenant screening service companies, banks, employers and other persons or entities with information relating to this Application. I also authorize the Community to provide information contained in this Application to various local, state and/or federal government agencies, including without limitation various law enforcement agencies. I understand that if I lease this apartment the Community shall have a continuing right to review my credit information, payment history, occupancy history and other information in this Application for purposes related to my lease and/or for account review both during and after the term of my lease.

I hereby agree to release and hold harmless **Colony Frontera, LLC, Anza Management Company and their** agents and employees from any and all liability, legal proceedings and costs including attorney's fees arising out of either the verification of the information contained on this application form or the release of this information to other parties. All of the above data and information set forth herein including, but not limited to the statement of my assets, income and financial condition is warranted to be true and accurate and to fully and correctly state my financial conditions as of the date of this application. I also covenant and agree to notify you of any changes in the status of any of the aforementioned items during the period of my tenancy.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

STAFF MEMBER SIGNATURE: