

Rental Application

Century West Properties, Inc.

www.rentcwp.com

12327 Santa Monica Blvd, Suite 101

Los Angeles, CA 90025

Tel (310) 899-9580 / Fax (310) 899-9470

Property Address:	_____	Unit #:	_____
Agent/Manager:	_____	Move-in Date:	_____
Contact Number:	_____	Rent/month:	_____
Date application received:	_____	Security Deposit:	_____
Check one:	Tenant: _____	Guarantor: _____	Pet Deposit: _____

Last name	First	Middle	Birthdate	Social Security #	Driver's License #	State

Other names ever used including maiden name:

E-Mail Address:

Other proposed occupants:	Age	Relationship to Applicant

Current Address

Street	Unit	Prior Address:	Street:	Unit:	
City	State	Zip	City:	State:	Zip:

Home Phone Number:

How long? From: To: **Cellular Phone Number:** How Long? From: To:

Last rent paid Month: Amount: Last rent paid Month: Amount:

Owner: Telephone: Owner: Telephone:

Mgr: Telephone: Mgr: Telephone:

Reason for Leaving: Reason for Leaving:

Employment	Current Employment	Previous Employment	Prior Employment
Employed by:			
Address:			
City, State, Zip:			
Employers telephone:	()	()	()
Occupation/position:			
Type of Business:			
Name of Supervisor:			
Dates of Employment:	From: To:	From: To:	From: To:
Monthly Salary:			

Other Income:

Credit Information

Name of Bank	Branch or Address	Approximate Balance

Credit References: Credit Cards, Car Payments, Other Loans

Creditor	Address/City	Balance	Mo Pmt

Personal References	Address/City	Relationship	Telephone	Time known	Occupation	
Emergency Contact	Address/City	Relationship	Telephone	Time known	Occupation	
Vehicles	Are you the registered owner? Yes: No:		If not, who is?			
List all operable automobiles	Year	Make	Model	Color	License Plate	State

1. Have you ever had credit problems? Yes _____ No _____
2. Have you ever had an unlawful detainer filed against you? Yes _____ No _____
3. Have you ever been evicted for NON PAYMENT of rent or for any other reason? Yes _____ No _____
4. Have you ever filed bankruptcy? Yes _____ No _____
5. Have you ever been convicted for selling, possessing, distribution or manufacturing illegal drugs? Yes _____ No _____
6. Do you have any pets? Yes _____ No _____ If so, how many? _____ Describe: _____
7. Will you be using any water-filled furniture in your residence? Yes _____ No _____
8. Please explain any "yes" answers:

The facts set forth in this application are true and correct. I authorize verification of the information contained herein solely for the purpose of establishing my qualifications as a tenant. I release anyone verifying such information or providing information from liability. I understand that incomplete or incorrect information provided in this application may cause a delay in processing and/or denial.

I further understand any false information or misrepresentation can be a basis for terminating any tenancy that may result if this Application is approved. The Application will be incorporated into any Rental Agreement of Lease entered into pursuant to this Application.

I understand the Owner and Management do not tolerate or condone illegal activity in or around the building, including activity related to narcotics use, possession, sales, manufacturing and distribution.

Agent will charge \$30.00 per person for credit report (\$8.25) and (\$21.75) for processing and reviewing this application (non-refundable.)

Applicants Signature _____

Date _____

Please fill out this Application completely prior to submission.