

"APPLICATION must be filled out in its entirety"

Date Turned In: ____ / ____ / ____

RENTAL APPLICATION

In filling out this application, I am **applying to rent** _____ Unit # _____, for the monthly rent amount of \$ _____ for a period of _____ months. **Application must be filled out completely before it will be accepted.** A copy of your current photo ID is required along with the Screening Fee/s at the time application is turned in. Each person above the age of 18 who is not married to the applicant, must fill out a separate application. In order to secure [HOLD] the unit until the move-in date, a **security deposit in the amount of \$ _____ must be paid by Cashier's Check or Money Order payable to Cycle Real Estate, Inc. (within 24 hours) upon approval of the application.** The security deposit will hold the unit for up to 14 days. *The application will be considered Approved/Denied when you are notified via phone/voice mail.* Should we not receive the Security Deposit within the 24-hour time frame, the unit will go back on the market.

Name: _____ S.S. # _____ - _____ Birth Date: ____ / ____ / ____

Spouse: _____ S.S. # _____ - _____ Birth Date: ____ / ____ / ____

Current Address: _____ City: _____ State: _____ Zip: _____

Driver's License or ID. #: _____ Spouse License or ID #: _____

Number of Minors: _____ Names & Ages: _____

Other Occupants: _____

Emergency Contact Name: _____ Relationship _____ Phone: () _____ - _____

Pets: Y / N Breed/Weight: _____ Service Animal: Y / N Breed/Weight: _____

Verifiable Rental References (At least 1 Year - Minimum) (Family is Excluded as Verifiable for Rental History)

Current Landlords Name: _____ **Family:** Y / N Phone: () _____ - _____ Fax: () _____ - _____

Rental Address: _____ Unit # _____ City: _____ State: _____ Zip _____

Move-In Date: ____ / ____ / ____ Move-Out Date: ____ / ____ / ____ Reason for Moving: _____

Previous Landlords Name: _____ **Family:** Y / N Phone: () _____ - _____ Fax: () _____ - _____

Rental Address: _____ Unit # _____ City: _____ State: _____ Zip _____

Move-In Date: ____ / ____ / ____ Move-Out Date: ____ / ____ / ____ Reason for Moving: _____

Previous Landlords Name: _____ **Family:** Y / N Phone: () _____ - _____ Fax #: () _____ - _____

Rental Address: _____ Unit # _____ City: _____ State: _____ Zip _____

Move-In Date: ____ / ____ / ____ Move-Out Date: ____ / ____ / ____ Reason for Moving: _____

Verifiable Employment / Income Information – (1 year continuous - minimum) Income Requirement are 3 Times the Rental amounts.

() Self-employed () Employed Full Time () Part Time () Student () Other

Current Employer: _____ Contact/HR: _____ Phone: () _____ - _____

Employer Address: _____ Position: _____ Gross Monthly Income: \$ _____ Start Date: ____ / ____ / ____

Previous Employer: _____ Contact/HR: _____ Phone: () _____ - _____ Start Date: ____ / ____ / ____

Employer Address: _____ Position: _____ Gross Monthly Income: \$ _____ End Date: ____ / ____ / ____

Spouse Employer: _____ Contact/HR: _____ Phone: () _____ - _____ Start Date: ____ / ____ / ____

Employer Address: _____ Position: _____ Gross Monthly Income: \$ _____ Start Date: ____ / ____ / ____

Previous Employer: _____ Contact/HR: _____ Phone: () _____ - _____ Start Date: ____ / ____ / ____

Employer Address: _____ Position: _____ Gross Monthly Income: \$ _____ End Date: ____ / ____ / ____

- 1) Vehicles owned: Make: _____ Model: _____ Color: _____ Plate# _____
Make: _____ Model: _____ Color: _____ Plate# _____
- 2) Other Vehicle: Motorhome / RV: Y/N Motorcycle: Y/N Utility Trailer / Boat: Y/N
- 3) Have you currently / ever been asked to Vacate? Y/N Reason: _____
- 4) Have you ever been evicted from tenancy? Y/N When: ____ / ____ / ____
- 5) Do you owe money to Current or Previous Landlord for rent or other damages? Y/N If "Yes" What for? Rent / Damages / Both
- 6) During the Governor's declared emergency, COVID-19 - Did you have any late: Rent payments? Y/N Credit payments? Y/N Owe Money? Y/N
- 6) Filed for bankruptcy? Y/N If "Yes" Chapter 7 or 13 _____ Open Bankruptcy Y/N Discharged Date: ____ / ____ / ____
- 7) Any felony arrest's/convictions within the past 5 years? Y/N If "Yes" What State: _____ Date of Conviction: ____ / ____ / ____ Charges: _____
- 8) Any drug/paraphernalia arrests/convictions within the past 5 years? Y/N If "Yes" Date of Conviction: ____ / ____ / ____ Charges: _____
- 9) Are you on probation or parole? Y/N If "Yes" Name of Parole Officer: _____ Phone: (____) _____ - _____
- 10) Any pending criminal or drug/paraphernalia charges? Y/N If "Yes" Date of Offence: ____ / ____ / ____ Type of Offence: _____
- 11) Have you or any of your dependents been: Arrested / Charged with / Convicted of Domestic Violence? Y/N If "Yes" when: _____
- 12) Have you or any of your dependents have or had: A restraining / permanent protection order filed against you or them? Y/N
- 13) Have you or any of your dependents been: Arrested / Declared / Charged with / or Being Convicted: Rape Crimes / Sex Offender / Assault / Predator / Kidnapper? Y/N If "Yes", What State: _____ If "Yes", Date of Conviction: ____ / ____ / ____
- 14) Do you have any alias and/or any other legal name(s)? Y/N Please List: _____

TENANT QUALIFING STANDARDS:

We do Employment History, Rental History, Criminal History along with a Credit Check

- A. **Must be employed** and meet the income requirement of **3 Times the Rental Amount**. We will accept social security, disability, and retirement pensions as employment.
- B. **Proof of income / payments must be supplied to the agent with the application**. Providing proof of income documentation could include but not limited to: Current Paystub/s with year to date totals, Prior years W2 and/or Tax Return, Military requires (LES). (Child support or alimony payments used as qualify income to must have a history of twelve (12) months of payments.)
- C. **Must** have a year's worth of **verifiable employment AND verifiable rental history**. (Family is excluded as verifiable for rental history)
- D. **A co-signer will be required should you not have a years' worth of verifiable income or rental history**.
- E. Should a co-signer be required, **they must meet income requirement of 5 times the rental amount**.
- F. **All tenants are required to obtain renters insurance on their personal property. Proof of Insurance is required at the time of lease signing. Cycle Real Estate, Inc. must be listed as additionally insured.**

All the following will be determined on a case-by-case basis:

1. **Prospective tenant or a qualified co-signer does not meet the income requirement.**
2. **Any current three day notice to vacate, currently has an unlawful detainer action proceeding OR has been evicted within past 10 years.**
3. **Any unpaid collections or judgements filed by a property management company or landlord.**
4. **Owes money to previous or current landlord for rent or other damages.**
5. **Any Felony conviction/s OR Drug conviction/s OR Currently on probation or parole.**
6. **Any pending felony or drug/paraphernalia (all types) charge/s.**
7. **Any applicant or member of the household has ever been declared a Sexual Offender/Predator.**
8. **Any applicant or member of the household has ever been Arrested / Charged with / Convicted of Domestic Violence.**
9. **Open OR non-discharged bankruptcy. (Chapter 13 requires Attorney letter or court paperwork.)**

NON-REFUNDABLE SCREENING FEE charge(s) are \$50.00 for the first application and \$30.00 for every application thereafter.

In compliance with the FAIR CREDIT REPORTING ACT, this is to inform you that a credit investigation involving the statements made on this application for tenancy is being initiated by Cycle Real Estate, Inc. I hereby agree and authorize Cycle Real Estate, Inc. to do their verification on all of the above information including but not limited to credit reports, character reports, criminal reports, income verification and rental history. **Said Screening Fee(s) are Non-Refundable.**

The information above, to the best of my knowledge, is true and correct. Any false or misleading information on this application will result in denial of the applicant(s) or immediate termination of residency if the tenant has occupied the unit.

Signed: _____ Date: ____ / ____ / ____ Work # (____) _____ - _____ Cell # (____) _____ - _____

Signed: _____ Date: ____ / ____ / ____ Work # (____) _____ - _____ Cell # (____) _____ - _____

Email Address\\$: _____ / _____