



Application to Rent or Lease

Unit Address _____ Rent _____ Deposit _____
(Individual application required for each proposed occupant over 18 years of age)

Name: First _____ Middle _____ Last _____ Jr. / Sr. Home Phone _____
Birth Date (mm/dd/yy) ____ / ____ / ____ Social Security Number _____
Drivers License Number _____ State _____ Exp. _____ Email Address _____

Present Address _____ City _____ State _____ Zip _____
Monthly Rent _____ Date in _____ Date out _____
Owner/Manager name _____ Owner/Manager Phone # _____
Have you given notice yet? _____ Reason for Leaving? _____

Last Prior Address _____ City _____ State _____ Zip _____
Monthly Rent _____ Date in _____ Date out _____
Owner/Manager name _____ Owner/Manager Phone # _____
Reason for Leaving? _____

Last Prior Address _____ City _____ State _____ Zip _____
Monthly Rent _____ Date in _____ Date out _____
Owner/Manager name _____ Owner/Manager Phone # _____
Reason for Leaving? _____

Present Occupation:
Employer _____ Business Phone _____
Name & Title of Supervisor _____ Date Employed _____ Gross Salary _____
Additional Income _____

Prior Occupation:
Employer _____ Business Phone _____
Name & Title of Supervisor _____ Date Employed _____ Gross Salary _____

Banking Information:
Name of Bank _____
Checking Account # _____ Savings Account # _____

Other Proposed Occupants:
Full Name _____ Age _____ Relationship to Applicant _____
Full Name _____ Age _____ Relationship to Applicant _____
Full Name _____ Age _____ Relationship to Applicant _____
Full Name _____ Age _____ Relationship to Applicant _____
Full Name _____ Age _____ Relationship to Applicant _____

Vehicles: (please describe all cars/motorcycles):

Make _____ Model _____ Color _____ Year _____ License # _____
Make _____ Model _____ Color _____ Year _____ License # _____
Make _____ Model _____ Color _____ Year _____ License # _____

In Case of Emergency Notify:

Name _____ Relationship to you _____ Phone _____
Address _____

Name of Close Friend: _____ Phone _____
Address _____

Name of Nearest Relative Living Elsewhere: _____ Phone _____
Address _____

Mother's Maiden Name _____

Do you have any pets? Yes No If so, how many and what? _____

Smoker? Yes No

Do you have any water filled furniture or do you intend to use any water filled furniture in the apartment? Yes No

Please describe if "yes" _____

When have you received welfare or Unemployment Insurance? _____

Have you ever been a defendant in an unlawful detainer (eviction) action? Yes No

Have you ever been two or more weeks late on the payment of rent? Yes No

Do you expect any change in your income in the near future? Yes No

Have you used any other names in the past? Yes No If so, what? _____

Have you ever filed bankruptcy? Yes No

Is any proposed occupant on probation, parole, or have any criminal record? Yes No

Explain Yes to any of the above, please explain here:

I REPRESENT THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT AND HEREBY AUTHORIZE XILA PROPERTY MANAGEMENT OR ITS AGENTS TO VERIFY INFORMATION AND OBTAIN A CONSUMER AND/OR INVESTIGATIVE CREDIT REPORT. IT IS UNDERSTOOD THAT THE CREDIT CHECK FEE IS NOT A DEPOSIT OR RENT AND WILL NOT BE REFUNDED IF USED.

Applicant Signature

Date

Please supply us with the following items for verification at the time of application.

Driver's License Social Security Card Recent Pay Stub Billing Statement with Current Address

NOTE: Your first months rent and security deposit are to be paid by cashiers check or money order when you are accepted and the lease is signed. (NO CASH ACCEPTED)

All correspondence and rental payments should be mailed to:

XILA PROPERTY MANAGEMENT

P.O. Box 3696

San Diego, CA 92163