

LaCrosse Village

A P A R T M E N T S

RENTAL INFORMATION

TENANT QUALIFICATION

<u>RENT</u>	1 Bedroom - \$2045.00 to \$2125.00 Upper Units Only
	2 Bedroom - \$2225.00 to \$2275.00

Rental rates for each apartment are determined on an individual basis. Rent premiums are charged for the location within the project and for the two-bedroom end units.

A NON SMOKING COMMUNITY

<u>SECURITY DEPOSIT</u>	1 Bedroom \$800.00 - 2 Bedroom \$800.00
-------------------------	---

<u>OCCUPANCY LIMITS.</u>	1 Bedroom: Maximum of three people
	2 Bedroom: Maximum of four people

LEASE – 6, 9, 12 Months Maximum.....

TENANT QUALIFICATIONS & GUIDELINES. A nonrefundable \$45 credit check is obtained on every individual (18 years old) subject to credit and reference screening. Verification of employment, rental history a review of tenant's current status is also performed. All applicant(s) must have a satisfactory background and demonstrate the ability to **pay the applicable rent on the first of each month.** A rent /income of between 33-35% will be used as a standard rule to qualify tenants. In situations where tenant has no other outstanding debts, a ratio of up to 40% may be used. Income is combined household and the income must be legal, provable and paid directly to applicant must be three times the amount of rent. A non-fundable \$45.00 application fee is required with all rental applications. **All must submit proof of one month income or commitment letter if starting new job. Income is combined household and that income must be legal, provable and paid directly to applicant. Credit score should be good to excellent (680 UP). Note: La Crosse Village only accepts our Credit Report for verification.**

Rental History: All applicant(s) must have positive rental references from prior landlord. All applicant(s) may not be considered if they have a record of eviction or conviction of the sale or manufacture of a controlled substance. No Co-Signers

Full deposit is required within 24 hours of acceptance, paid by cashiers check or money order only.

PET POLICY: Pet(s) may be allowed, but only in strict accordance with the pet rules and regulations. Fifty dollars (\$50.00) will be added to base rent and an additional deposit of \$1000.00 is required. Second pet is \$800.00. Any resident found to have unregistered pets may be subject to immediate termination of tenancy, eviction, penalties for damages and/or full loss of security deposit. **Breed restrictions apply to Dogs: Adult weight under 25 lbs .Copy of last Veterinary Visit/Copy of Dog License.*

Fitness Facility

Satellite Dish: \$200 additional deposit with prior consent from Management. Some locations do not get service. Must adhere to satellite policy no drilling holes, cutting or attaching to roof.

“FIRST COME, FIRST QUALIFIED, FIRST SERVED” Omission or falsified information will result in denial.

**Note: The above is subject to change without notice. Office Hours: 10AM to 5PM Monday - Friday
Email: OConnell@LaCrosseVillage.com**

APPLICATION TO RENT

Tenant
 Guarantor

(All sections must be completed) **Individual applications required from each occupant 18 years of age or older.**

Last Name		First Name		Middle Name		Social Security Number or ITIN	
Other names used in the last 10 years				Work phone number ()		Home phone number ()	
Date of birth		E-mail address				Mobile/Cell phone number ()	
Photo ID/Type		Number		Issuing government		Exp. date	
Other ID							
1. Present address		City		State		Zip	
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out						Current rent \$ /Month	
2. Previous address		City		State		Zip	
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out							
3. Next previous address		City		State		Zip	
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out							
Proposed Occupants: List all in addition to yourself	Name			Name			
	Name			Name			
	Name			Name			
Do you have pets?	Describe			Do you have a waterbed?	Describe		
How did you hear about this rental?							
A. Current Employer Name				Job Title or Position		Dates of Employment	
Employer address				Employer/Human Resources phone number ()			
City, State, Zip				Name of your supervisor/human resources manager			
Current gross income				Check one			
\$				Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year			
B. Prior Employer Name				Job Title or Position		Dates of Employment	
Employer address				Employer/Human Resources phone number ()			
City, State, Zip				Name of your supervisor/human resources manager			
Other income source _____ Amount \$ _____ Frequency _____							
Other income source _____ Amount \$ _____ Frequency _____							



**Unauthorized Reproduction
of Blank Forms is Illegal.**



Name of your bank	Branch or address	Account Number

Please list ALL of your financial obligations below.

Name of Creditor	Address	Phone Number	Monthly Pymt. Amt.
		()	
		()	
		()	
		()	
		()	
		()	

In case of emergency, notify:	Address: Street, City, State, Zip	Relationship	Phone
1.			
2.			

Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				
2.				

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Other motor vehicles: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____

Have you ever been convicted of selling, distributing or manufacturing illegal drugs? _____

Applicant represents that all the above statements are true and correct, authorizes verification of the above items and agrees to furnish additional credit references upon request. Applicant authorizes the Owner/Agent to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history and employment history. Applicant consents to allow Owner/ Agent to disclose tenancy information to previous or subsequent Owners/Agents.

Owner/Agent will require a payment of \$ 15.00 _____, which is to be used to screen Applicant.

The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports \$ 29.95 _____
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) \$ 15.05 _____
3. Total fee charged \$ 15.00 _____

The undersigned is applying to rent the premises designated as:

Apt. No. _____ Located at _____ La Crosse Village Apartments _____

The rent for which is \$ _____ per Month _____. Upon approval of this application, and execution of a rental/lease agreement, the applicant shall pay all sums due, including required security deposit of \$ 800.00 _____, before occupancy.

_____ **Date**

_____ **Applicant (signature required)**



**Unauthorized Reproduction
 of Blank Forms is Illegal.**



RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of Applicants for rental housing. The information provided by the current or former Owner/Agent may be used solely for the purpose of evaluating the application for rental housing.
- The Owner/Agent requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 2. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. **Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)**

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Rental Applicant Reference Request to the Owner/Agent listed below. I hereby acknowledge that the Owner/Agent can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (_____) _____

Signature _____ Date _____

TO BE COMPLETED BY OWNER/AGENT

2. Person requesting the rental reference

Name of Owner/Agent _____ La Crosse Village Apartments

Address _____ 15945 Village Way _____ Unit # _____

City _____ Morgan Hill _____ State _____ Ca _____ Zip _____ 95037

Phone number (____ 408 _____) _____ 779-6577 _____ Fax number (____ 408 _____) _____ 779-2947

3. Applicant's rental information

Name of rental community (if any) _____

Address of rental unit _____ Unit # _____

City _____ State _____ Zip _____

Name of Owner/Agent _____

Phone number (_____) _____ Fax number (_____) _____

Move-in date: Month _____ Year _____ Move-out date: Month _____ Year _____ or current resident

TO BE COMPLETED BY FORMER OR CURRENT OWNER/AGENT

4. Rental reference information

Did Applicant live at your property during the period indicated above? Yes No

If no, what were the dates of occupancy? From (month/year): _____ / _____ To (month/year): _____ / _____

How many times during the past 12 months did Applicant pay the rent late? 0 1-2 3-5 6 or more

Was any check from Applicant returned due to non-sufficient funds (NSF)? Yes No

Did you ever file for an unlawful detainer against Applicant for unpaid rent? Yes No

If yes, what was the result? _____

Does Applicant owe any amount for delinquent rent, utilities or damage to unit? Yes No

Did Applicant provide notice for ending tenancy according to the terms of the rental agreement? Yes No

Not applicable because Applicant still resides at unit

Did you ever serve a Three Day Notice to Applicant Yes No

If yes, please explain: _____

Information provided by: Name _____ Phone number (_____) _____

Information obtained by: Phone Mail Fax



EMPLOYMENT VERIFICATION FORM

This form is used to obtain information regarding the employment history of Applicants for rental housing. The information provided by the current or former Employer may be used solely for the purpose of evaluating the application for rental housing. The Owner/Agent requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 2. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. **Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)**

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Employment Verification Request to the Owner/Agent listed below. I hereby acknowledge that the Owner/Agent can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (_____) _____

Signature _____ Date _____

TO BE COMPLETED BY OWNER/AGENT

2. Person requesting the employment reference

Name of Owner/Agent _____ La Crosse Village Apartments

Address _____ 15945 Village Way _____ Unit # _____

City _____ Morgan Hill _____ State Ca Zip 95037

Phone number (408) 779-6577 Fax number (408) 779-2947

3. Applicant's employment information:

Present **OR** Prior Occupation (check one)

Employer Name _____

Employer Address _____

City _____ State _____ Zip _____

Supervisor's/HR Manager's Name _____ Employer/HR Phone number (_____) _____

Beginning and Ending Dates of Employment _____

Current Gross Income (if applicable) \$ _____

TO BE COMPLETED BY FORMER OR CURRENT EMPLOYER

4. Employment information verified

Is the information provided in Section 3 above correct?

Present Prior Occupation (check one)

Employer Name

Employer Address

Supervisor's/HR Mgr's Name

Employer/HR Phone Number

Beginning and Ending Dates of Employment

Current Gross Income (if applicable)

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

If No, please explain: _____

