

# MGR

Property Management

## APPLICANT SCREENING POLICY

The following is required with your application:

1. Bring in your Social Security Card, if any, or other documentation of identity for credit verification purposes.
2. Bring in your picture I.D. to confirm identity.
3. Proof of Income:
  - a. 2-3 recent copies of verifiable pay records
  - b. and/or documentation of any other sources of income.

The following are the requirements you will have to meet to be considered for a rental:

1. If you are employed, employment verification will be made either by FAX on the company letterhead or by phone. If you are not employed, your income must be legal and verifiable.  
Rental references will also be verified.
2. Your monthly gross income has to be at least three (3) times the amount of the rent.
3. **YOUR CREDIT MUST QUALIFY.** This will be determined by your credit history and FICO score (Risk Predictor Score), which are reported by the Credit Bureau. Some items that would negatively affect your credit are repossessions, collection accounts, tax liens, slow paying credit history or a FICO score under 600. Applicants with no credit history who meet all other rental criteria will be permitted to rent by paying an additional deposit. **ANYONE EVICTED FROM A PRIOR UNIT OR HOUSE WILL BE DENIED RESIDENCY.**
4. Individual applications required from each occupant 18 years of age or older.

**THERE IS A \$30.00 NON-REFUNDABLE APPLICATION FEE PER PERSON (CERTIFIED FUNDS ONLY! NO CASH & NO PERSONAL CHECKS.) WE MAY CHECK CREDIT REPORT, COURT RECORDS, AND CRIMINAL RECORDS. ANYONE CONVICTED OF MANUFACTURE OR DISTRIBUTION OF A CONTROLLED SUBSTANCE WILL BE DENIED RESIDENCY.**

If your application is approved, all move-in fees (**DEPOSIT AND RENT**) must be in the form of a money order or cashier's check **ONLY.**

If you have any questions or concerns regarding your application requirements. Please feel free to contact:

**MGR Property Management, Inc., License #01841920**

Phone: 909-581-6600

Fax: 909-981-0081

Each property could have some separate or different rules regarding pets or number of parking spaces, etc. **Please ask if you have any questions before submitting the application.**

**PLEASE SIGN THE APPLICATION WHERE INDICATED ON THE SECOND PAGE. THANK YOU.**

Rev. 1/6/10

MGR Property Management, Inc.  
1425 W. Foothill Blvd., Suite 200  
Upland, CA 91786  
(909) 581-6600 Fax: (909) 981-0081  
www.mgrmgmt.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 _____							



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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 \$ \_\_\_\_\_, 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 \$ \_\_\_\_\_
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) \$ \_\_\_\_\_
3. Total fee charged \$ \_\_\_\_\_

The undersigned is applying to rent the premises designated as:

Apt. No. \_\_\_\_\_ Located at \_\_\_\_\_

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant (signature required)



## CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

The California Apartment Association supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

The California Apartment Association reaffirms its belief that equal opportunity can best be accomplished through effective leadership, education, and the mutual cooperation of owners, managers, and the public.

Therefore, as members of the California Apartment Association, we agree to abide by the following provisions of this Code for Equal Housing Opportunity:

- We agree that in the rental, lease, sale, purchase, or exchange of real property, owners and their employees have the responsibility to offer housing accommodations to all persons on an equal basis.
- We agree to set and implement fair and reasonable rental housing rules and guidelines and will provide equal and consistent services throughout our residents' tenancy.
- We agree that we have no right or responsibility to volunteer information regarding the racial, creed, or ethnic composition of any neighborhood, and we do not engage in any behavior or action that would result in "steering."
- We agree not to print, display, or circulate any statement or advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.



# 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 1. 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 \_\_\_\_\_

Address \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number (\_\_\_\_\_) \_\_\_\_\_ Fax number (\_\_\_\_\_) \_\_\_\_\_

### 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 1. 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 \_\_\_\_\_

Address \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number (\_\_\_\_\_) \_\_\_\_\_ Fax number (\_\_\_\_\_) \_\_\_\_\_

### 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 VERIFIED BY CURRENT OR FORMER EMPLOYER

### 4. Employment information verification

Is the information provided in Section 3 above correct?

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Employer Name                            | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Employer Address                         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Supervisor's/HR Manager's Name           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Employer/HR Phone Number                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Beginning and Ending Dates of Employment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Current Gross Income (if applicable)     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

### Verification provided by:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

If No, please explain: \_\_\_\_\_

Verification obtained by:

- Phone  Mail  Fax



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