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APPLICATION TO RENT

An Application to Rent is required for any occupant 18 years of age or over.

Date of Application _____

Unit(s) of interest _____

Full name _____ Date of Birth _____

Cell _____ Home/Work _____ Driver's License # _____

Email _____ State _____ Expires _____

SSN _____

(you may wait to provide SSN until final approval process)

Total number of people in your party (including yourself): _____ Adults
 _____ Minors

Names of other adults who are also applying (they must each complete an Application to Rent): _____

Names & ages of all minors: _____

	NO	YES	Explain
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Do you have any pets or animals of any kind ?	_____	_____	_____
Are you planning to use a co-signer to guarantee rent payment?	_____	_____	_____
Are you currently on any housing assistance program (Section 8, VA)?	_____	_____	_____
Do you own any liquid-filled furniture (waterbeds, fish tanks)?	_____	_____	_____
Have you ever been evicted/party to an unlawful detainer action ?	_____	_____	_____
Have you ever been asked to move out of a residence?	_____	_____	_____
Have you filed bankruptcy in the last seven years?	_____	_____	_____
Have you ever been convicted of or pleaded no contest to a felony ?	_____	_____	_____

Auto make & model _____ Year _____ Color _____ Lic. # _____ State _____

Other cars, boats, trailers, etc.: _____

Emergency Contact: Name _____ Relationship _____

Address _____ Phone _____

RESIDENCE HISTORY

1. Current address _____

___ Own ___ Rent Name of landlord/manager _____
 Landlord/manager's phone _____

Dates of occupancy: _____ Reason for leaving: _____

2. Previous address _____

___ Own ___ Rent Name of landlord/manager _____
 Landlord/manager's phone _____

Dates of occupancy: _____ Reason for leaving: _____

3. Previous address _____

___ Own ___ Rent Name of landlord/manager _____
 Landlord/manager's phone _____

Dates of occupancy: _____ Reason for leaving: _____

(continue on reverse)

EMPLOYMENT & INCOME

Monthly Income (Gross)

Current employer _____
Position or title _____
Dates** _____
Employer's address _____
Phone _____

\$ _____

Other current employment _____

\$ _____

Other sources of income (SSI, Disability, Spousal/Child Support, Student Loans)

- 1. _____
- 2. _____

\$ _____
\$ _____

TOTAL MONTHLY INCOME

\$ _____

** If current employment is less than one year, list immediate prior employment information:

BANK ACCOUNTS

Name of bank/branch	Last 4 digits of acct #	Type of account	Account balance

CREDITORS (credit cards, car loans, student loans, mortgages, medical bills, spousal/child support, etc.)

Name of creditor	Last 4 digits of acct #	Balance due	Monthly payment

Applicant represents the above information to be true, correct and complete and hereby authorizes verification of the information provided, including obtaining credit report at the actual cost of \$20.00/applicant to be paid by applicant. The cost of the credit report is not a deposit or rent, and will not be applied to future rent or refunded, even if the application to rent is declined. Applicant understands that the landlord may terminate any rental agreement entered into for any misrepresentation made above.

Applicant understands and agrees: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; and (ii) Landlord or Manager or Agent may accept more than one application for the Premises and, using their sole discretion, will select the best qualified applicant; and (iii) applicant will be responsible for any charges incurred while verifying the information on this application in the event that any misrepresentation has been made above.

Signature of Applicant _____ **Date** _____

****For office use****

Receipt for Credit Report (\$20/person): \$ _____ mo/cc/ _____ Date _____ Rec'd by _____

RECEIPT OF SECURITY DEPOSIT

Applicant has deposited the Sum of _____ Dollars \$ _____
evidenced by: ___ Cashier's Check ___ Money Order ___ Other _____ payable
to _____, to be held uncashed until approval of the application to rent, as deposit
on the property located at _____ at a monthly rent of \$ _____.
The property to be occupied only by the person(s) named in the application. If the application to rent is not approved within
___ days, this deposit shall be returned to applicant(s). If approved, the ___ month-to-month, ___ lease,
shall commence on _____, _____. Additional Terms: _____

TOTAL SUMS DUE PRIOR TO OCCUPANCY:

Rent for the period _____ to _____	\$ _____
Security deposit (not applicable toward last month's rent)	\$ _____
Pet deposit (if applicable)	\$ _____
Other _____	\$ _____
Total	\$ _____
Less amount received above	\$ _____
Balance due, on or before _____, _____	\$ _____

The undersigned has read the foregoing and acknowledges receipt of a copy.

Signature of Applicant _____ **Date** _____