## RENTAL APPLICATION Equal Housing Opportunity. http://www.detroitLA.com (323)230-0087

## Please complete and provide credit report (free report available at <u>https://www.annualcreditreport.com</u>) for each applicant then scan and email to rent@detroitla.com or fax to 208-730-1625.

The undersigned hereby makes an application to rent 162 or 164 North Detroit St, Los Angeles, CA 90036

PLEASE TELL US ABO	UT YOURSELF					
Full Name		Mobile Phone	( )			
Full Name Date of Birth						
Email Address:	Social Security # Other Phone( ) Dependents Date of Birth					
Names of Dependents	Dependents Date of Birth					
List All Pets					-	
PLEASE PROVIDE RES	IDENTIAL HISTORY (LAS	T 3 YEARS)				
Current Address	Ap	ot# City		State	_ Zip	
Month/Year Moved In	Reasons for Lea	iving		Rent \$		
Owner/Agent		Pr	none ()			
Previous Address (last 3	years)		Rent	\$		
Owner/Agent		Phor	ne()			
PLEASE DESCRIBE YO	UR CREDIT HISTORY					
Have you declared bankr	uptcy in the past seven (7)	years?	Yes	No_		
Have you ever been evic	ted from a rental residence	?	Yes	No		
Have you had two or more late rental payments in the past year? Yes No						
Have you ever willfully or	intentionally refused to pay	rent when due?	Yes	No_		
PLEASE PROVIDE YOU	R EMPLOYMENT INFORM	MATION				
Your Status: Full T	imePart Time	Student U	nemployed			
Employer						
Dates employed	Empl	oved as				
Supervisor Name	•••••••••••••••••••••••••••••••••••••••	Phone (	)			
Salary \$	per (If emp	loved by above le	ess than 12 r	nonths, prov	/ide name & phone of	
previous employer or sch	ool:	, ,		.)	·	
If you have other sources	ool: of income that you would I	ike us to conside	r, please list	income, sou	urce, and person (banker,	
employer, etc.) who we m	nay contact for confirmation	. You do not have	e to reveal al	imony, child	support, or spouse's annu	
	us to consider it in this appl					
Amount \$	Source/Contact N	ame		<u></u>		
PLEASE LIST YOUR RE	FERENCES					
Banking Accounts:						
Name	Type of Account	Ac	count Numb	er		
Name	Type of Account		count Numb			
Personal Reference or I	Emergency Contact:					
Phone	Address Relationship					
Driver's License:						
	mber	State				
Vehicle Information:						
	Year	License	e Plate State			
ADDITIONAL INFORMA	TION:					

Please provide any additional information that might help owner/management evaluate this application?

Where may we reach you to discuss this applicat	tion?						
Day Phone # ( )	_Night Phone # (	)					
Email:							
I recognize that as a part of your procedure for processing my application, and investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.							
The above information, to the best of my knowledge, is true and correct.							
Please sign: X Name of Applicant							
Name of Applicant		Date					
AUTHORIZATION Release of Information							
I agree to permit an investigation of my credit, tenant history, banking and employment for the purposes of renting an apartment with this owner/manager.							
Name (please print)							

X\_\_\_\_\_ Signature

Date