

# TENANT APPLICATION FORM

For: Moser Properties

Phone: 707-839-3233 Fax: 707-839-2568

Website: [www.moserproperties.com](http://www.moserproperties.com)

Email: [barb@moserproperties.com](mailto:barb@moserproperties.com)

Each person over the age of 18 who will be residing in the unit is to fill out a separate application form.

All applications with a copy of your photo ID are to be dropped off or mailed to:

**3101 Concorde Drive, Suite E, McKinleyville, CA 95519**

**OR email to [barb@moserproperties.com](mailto:barb@moserproperties.com)**

**PLEASE PRINT CLEARLY**

**Property Address:** \_\_\_\_\_

**APPLICANT:** \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

LAST FIRST M.I.

Social Security # \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State Issued: \_\_\_\_\_

Vehicle License #: \_\_\_\_\_ Vehicle Make & Model: \_\_\_\_\_

**ADDITIONAL OCCUPANTS:** (List everyone who will live with you):

Full Name	Relationship	Age	Occupation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**RENTAL HISTORY:**

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Landlord/Manager: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Dates Occupied: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Landlord/Manager: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Dates Occupied: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Landlord/Manager: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Dates Occupied: \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Current Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Supervisor's Phone: (\_\_\_\_) \_\_\_\_\_  
Length of Employment: \_\_\_\_\_ Est. Annual Income: \_\_\_\_\_

**STUDENT INCOME INFORMATION:**

- 1. Are you receiving Financial Aid? Yes\_\_No\_\_ \$ \_\_\_\_\_  
\*Per month, year or semester? \_\_\_\_\_
- 2. Are you receiving any Grants? Yes\_\_No\_\_ \$ \_\_\_\_\_  
\*Per month, year or semester? \_\_\_\_\_
- 3. Are you receiving money from your parents? Yes\_\_No\_\_ \$ \_\_\_\_\_  
\*Per month, year or semester? \_\_\_\_\_
- 4. Total Monthly Student Income (sum of lines 1, 2, 3) \$ \_\_\_\_\_

**MISCELLANEOUS:**

Do you have or intend to have liquid furniture? Yes\_\_No\_\_  
 Do you have **any** pets? Yes\_\_No\_\_  
 Dog, cat, snake, hamster, fish, etc.? \_\_\_\_\_  
 Do you smoke? Yes\_\_No\_\_ Inside or outside? \_\_\_\_\_  
 Have you or anyone who will reside with you ever been convicted of a felony?  
 Yes\_\_No\_\_ If "Yes", what was the conviction and date: \_\_\_\_\_  
 Have you ever: Filed for bankruptcy? Yes\_\_No\_\_  
                   Been sued? Yes\_\_No\_\_  
                   Been evicted? Yes\_\_No\_\_  
 If you answered "Yes" to any of the above, please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**EMERGENCY CONTACT:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_

**ALTERNATE EMERGENCY CONTACT:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_

I certify that all the information given above is true and correct and understand that my Rental Agreement may be terminated by Landlord if I have made any misrepresentation in this application. I hereby authorize you to contact any listed references and run a credit report. I understand that this application will be retained regardless of approval.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_