



DAVID N. SCHULTZ INCORPORATED

REAL ESTATE INVESTMENTS ~ PROPERTY MANAGEMENT
715 North Central Avenue, Suite 300 ~ Glendale, California 91203-1225
Telephone: (818) 240-1070 ~ FAX: (818) 545-3688 ~ www.dnsrents.com

RENTAL APPLICATION

THE UNDERSIGNED IS APPLYING TO RENT APT. NO. _____ LOCATED AT _____ . THE RENT IS \$_____ PER MONTH.	
HOW DID APPLICANT HEAR OF VACANCY? SIGN AT BUILDING RENTERS GUIDE OTHER: _____	AD IF SO, WHICH PAPER OR WEBSITE? _____

ALL SECTIONS MUST BE COMPLETED. INDIVIDUAL APPLICATIONS ARE REQUIRED FROM EACH OCCUPANT 18 YEARS OF AGE OR OLDER.

LAST NAME		FIRST NAME		M/I	SS#		MGR INITIAL
DATE OF BIRTH	DRIVER'S LICENSE #		D/L EXPIRATION DATE		STATE	HOME PHONE#	
ADDRESS ON CURRENT D/L			CITY		STATE	ZIP CODE	MGR INITIAL
CURRENT ADDRESS			CITY		STATE	ZIP CODE	
DATE MOVED IN	30 DAY NOTICE GIVEN?	OWNER/MANAGER NAME				OWNER/MANAGR PHONE #	
MONTHLY RENT	REASON FOR MOVING						
PREVIOUS ADDRESS (LAST 5 YEARS)			CITY		STATE	ZIP CODE	
DATE MOVED IN	DATE MOVED OUT	OWNER/MANAGER NAME				OWNER/MANAGER PHONE#	
MONTHLY RENT	REASON FOR MOVING						
NEXT PREVIOUS ADDRESS			CITY		STATE	ZIP CODE	
DATE MOVED IN	DATE MOVED OUT	OWNER/MANAGER NAME				OWNER/MANAGER PHONE #	
MONTHLY RENT	REASON FOR MOVING						
PROPOSED	NAME		AGE		NAME		AGE
	NAME		AGE		NAME		AGE
	NAME		AGE		NAME		AGE
DO YOU OWN A PET(S)? (THIS BUILDING MAY OR MAY NOT ACCEPT PETS.)					IF YES, DESCRIBE PET(S):		
YES NO							
PRESENT OCCUPATION/JOB TITLE:				EMPLOYER NAME			
HOW LONG EMPLOYED	PHONE #			EMPLOYER ADDRESS			
NAME OF YOUR SUPERVISOR							
PREVIOUS OCCUPATION/JOB TITLE (LAST 5 YEARS)				EMPLOYER NAME			
HOW LONG EMPLOYED	PHONE #			EMPLOYER ADDRESS			
NAME OF YOUR SUPERVISOR							



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FINANCIAL INFORMATION

CURRENT GROSS INCOME \$ _____ PER (CHECK ONE): WEEKLY BI-MONTHLY MONTHLY ANNUALLY
(THREE RECENT PAYCHECK STUBS ARE REQUIRED FOR VERIFICATION. IF SELF-EMPLOYED, TAX RETURN & BANK STATEMENTS ARE REQUIRED.)

NAME OF YOUR BANK	BRANCH OR ADDRESS	ACCOUNT NUMBER
		CHECKING
		SAVINGS

NAME OF CREDITOR(S)	ADDRESS	PHONE NUMBER	MO. PYMT. AMT.

HAVE YOU EVER FILED FOR BANKRUPTCY? NO YES STATE REASON: _____

HAVE YOU EVER BEEN EVICTED OR ASKED TO MOVE? NO YES STATE REASON: _____

PERSONAL INFORMATION

PERSONAL REFERENCES:

NAME	PHONE NUMBER	ADDRESS	HOW LONG KNOWN	OCCUPATION

AUTOMOBILE: MAKE _____ MODEL _____ YEAR _____ LICENSE# _____

AUTOMOBILE: MAKE _____ MODEL _____ YEAR _____ LICENSE# _____

IN CASE OF EMERGENCY, NOTIFY:

NAME	RELATIONSHIP	PHONE NUMBER	ADDRESS

Applicant represents that all the statements made above are true and correct. Applicant hereby authorizes verification of above information and agrees to furnish additional information upon request. Applicant agrees to provide payment in the form of cash or money order for a credit check fee and payment in the form of a check or money order made payable to David N. Schultz, Inc. for a holding deposit, both of which must accompany this application. Upon approval of this application, Applicant agrees to sign a Rental or Lease Agreement within 48 hours. After 48 hours, if Applicant chooses not to rent, whether or not the Rental Agreement is signed, Applicant will be charged for the days the apartment has been taken off the market.

DATE _____ APPLICANT'S SIGNATURE _____

DAVID N. SCHULTZ, INC. CORPORATE USE

TOTAL CREDIT CHECK FEE _____	FORM OF PAYMENT _____	RECEIVED BY _____	DATE _____
APPROVED	REJECTED REASON: _____	BY _____	DATE _____