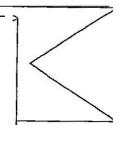


ALLPOINT PROPERTIES RENTAL APPLICATION



Allpoint Properties 2315-C Street Sacramento, CA 95816 (916) 446-1000 OFFICE

www.allpoint.com

Email: allpointrentals@aol.com

Office Hours: Monday through Thursday 10:00 A.M.- 5:30 P.M.

Fridays: 10:00AM – 10:00 A.M. - 2:00 P.M. Closed for Lunch 12:00 P.M -1:00 P.M.

Closed on Saturday and Sunday and most Holidays

We show properties by OPEN HOUSE "SHOWINGS." All rental advertising is placed on ZILLOW; TRULIA, HOTPADS AND CRAIGSLIST. The first step in renting one of our properties is to attend our Open House. The Representative showing the property will give you our application to rent. Please sign our Open House Guest List at the property.

Please fill in all items completely. This House Guest can accommodate up to two applicants. Ask for Additional application(s) if more than two adult applicants.

We charge a \$50.00 application fee for a routine CREDIT-REFERENCE check. This fee covers one adult applicant. Each additional adult applicant will be \$50.00 each. WE DO NOT ACCEPT ANY PERSONAL CHECKS. THIS FEE IS NON-REFUNDABLE.PLEASE OBTAIN EITHER A MONEY ORDER OR EXACT CASH, if paying cash at the Office we will give a receipt or PAY ONLINE AT OUR WEBSITE. If you choose to pay by Credit Card there is a processing fee \$1.25. We do not take applications at the properties being shown. Turn in your application to the Office, or scan to our email with your attachments.

We reserve the right to accept or reject any application based on the information provided in Credit Reports, landlord references, and ability to pay (income sources).

Qualifying income criteria for acceptance purposes should include the following: all adult applicants must have Sufficient Income to meet the criteria of 3 times the Rent Advertised. 2 Years of Good Landlord References.

When submitting application, please make sure each adult signs the application; submit Copies of California identification or Driver's License and pay stubs/income verifications. Thank you.

(When turning in applications after normal business hours, please use our "drop box" located near the front door).

RENTAL APPLICATION FORM

Office Use Only:

Photo ID: _____ App Fee Paid: _____ Staff Initials: Date: _____ (This application can accommodate 2 adults. If more than 2 adults, please take an additional application.) TODAY'S DATE: _____ Smoker Non-Smoker Full Name: ______ DOB: _____ Driver's License or ID #: ______ State: _____ Expiration Date: _____ Home Telephone #: _____ Work Telephone #: _____ Cellular Phone# : _____ Email Address: _____ Present Home Address: _____ City: _____ State: ____ Zip: ____ If you rent, your Landlord/Manager's Name and Phone Number: ____________________ Reason for moving: ______ If at above address for less than 2 years, list former address: _______ Former Landlord Name and Phone Number: Source of Income: _____How often paid? _____ Are you currently employed? \Box Y \Box N Occupation/Title: _____ Employer: _____ Employment Address: _____ Phone Number: _____ Supervisor: _____ Salary: ____ Check one: _Weekly _ Bi-Weekly _Monthly- Other: _____ Length of time on job: _____ Where do you bank? ____ Checking Savings Any additional income sources? How much? Emergency Contact: _____ Phone Number: _____ Emergency Contact Address:

TODAY'S DATE: _____

Smoker Non-Smo	ker					
Full Name:	SSN:	#:	DOB:			
Driver's License or ID #:		State:	Expiration Date:			
Home Telephone #:	Work Telep	hone #:	Cellular Phon	e#:		
Email Address:						
Present Home Address:		_ City:	State:	Zip:		
If you rent, your Landlor	d/Manager's Name and Pho	one Number:				
Reason for moving:						
If at above address for le	ess than 2 years, list former	address:				
Former Landlord Name a	and Phone Number:					
Source of Income:	How often paid?	Are	e you currently employed?	□y□n		
Occupation/Title:		_ Employer:				
Employment Address:	Phone Number:					
Supervisor:	Salary:	Check on	ne:□Weekly□Bi-Weekly□	Monthly- Other:		
Length of time on job: _	W	here do you bar	nk?	\square Checking \square Savings		
Any additional income so	ources?		How much? _			
mergency Contact: Phone Number:						
Emergency Contact Add	ress:					
Will you have a waterbe	d or do you plan to have on	e?□Y□N If yes	s, how many?			
Do you have any pets?] Y					
Describe pets. How man	y and what kind:					
List any other occupants	s planning to reside at the d	welling:				
(Please indicate: First an	d Last Name)					
NAME			Age			
Auto Make:	Model:	Year:	Lie. Plate#:			
Auto Make:	Model:	Year:	Lie. Plate#:			

Applicant's Signature	Date	Applicant's Signature	Date
Please print this application an email the signed application to	•	ction below, and scan it or take a picture wiallpointrentals@aol.com.	ith your phone, and
quoted deposit within 24 hours convert to a SECURITY DEPOS	and pay the balance wl	d to pay a "HOLD DEPOSIT". You must pay nen you sign your rental agreement. Any HO your written rental agreement. If you are re TY DEPOSIT WITHIN 24 HOURS.	LD DEPOSIT will
The undersigned is making this The rental amount as it appears		property located at:s \$s	
•	_	t to request written or verbal verification or the verification of the periods, and any other required verificat	• •
all items including but not limite	ed to the obtaining of a	ements are true and correct and hereby au written or verbal credit consumer report of dditional references or other information u	check and a landlord
If yes, please explain the charge	(s) and/or conviction(s):	
Has any Applicant listed on page	e 1 or Page 2 of this ap	plication ever been arrested and/or convic	ted of a felony?□Y□I
Have you filed, or do you intend	l to file, US Bankruptcy	? ☐ Y ☐ N (If "yes") you're filing date:	
Lie. Plate#:			
Lie. Plate#:			
If you own any of the following,	please list (additional	cars, motorcycles, boats, trailers, etc.):	

Hold deposits may be forfeited if you fail to execute your rental agreement and decline to rent. Ask for policy on this from the Property Manager. ALLPOINT PROPERTIES IS ALSO KNOWN AS ALLPOINT REAL ESTATE SERVICES, INC.