



TENANT LONG TERM RENTAL APPLICATION

Office Use Only						
Social Security # Verified:	<input type="checkbox"/>	Credit Report Processed by:		Preferred Move-In Date:		Received \$25 Processing Fee: <input type="checkbox"/>
Driver's License Verified:	<input type="checkbox"/>	Processed On:		Property:		

Neatly complete all information below. All applicants over the age of 18 must complete and sign their own application.

Application fee: \$25 Each.

Applicants Full Name: _____ Phone # _____

Current Mailing Address: _____ City _____ State _____ Zip _____

Social Security # _____ Drivers License # _____ State _____ Exp. _____

Current Address _____ City _____ State _____ Zip _____

Current Landlord's Name _____ Landlord's Phone # _____

Dates @ Address From: _____ To: _____ Reason for leaving (details): _____

Previous Address _____ City _____ State _____ Zip _____

Previous Landlord's Name _____ Phone # _____

Dates @ Address From: _____ To: _____ Reason for leaving: _____

Auto Yr _____ Make _____ Model _____ State _____ License Plate # _____

Present Employer _____ Position _____ Mo. Income \$ _____

Phone # _____ Dates @ job From: _____ To: _____ Other income/source _____

Employer's Address _____ City _____ State _____

Past Employer _____ Position _____ Mo. Income \$ _____

Phone # _____ Dates @ job From: _____ To: _____ Other income/source \$ _____

Past Employer's Address _____ City _____ State _____

Past Employer _____ Position _____ Mo. Income \$ _____

Phone # _____ Dates @ job From: _____ To: _____ Details _____



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Have you ever been party to an eviction? ☐ Yes ☐ No Number of Pet(s) _____ Type of Pet(s) _____

Personal References: Other than living with you

Name _____ Yrs. Known _____ Relationship _____ Phone # _____

Name _____ Yrs. Known _____ Relationship _____ Phone # _____

Name _____ Yrs. Known _____ Relationship _____ Phone # _____

Total number of adults _____ Total number of children living with you under the age of 18 _____

Names and relations of all other occupants. Please include current phone #'s:

Name	Relationship	Phone Number (cell/work)
a) _____	_____	_____
b) _____	_____	_____
c) _____	_____	_____

I certify the above information is correct and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I understand that giving incomplete or false information is grounds for rejection of the application. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I have reviewed and read the Owner/Agent's rental criteria.

Applicant Signature: _____

Print Name: _____

Date: _____



TO:	_____
FAX:	_____
FROM:	_____

TENANT LONG TERM RENTAL REFERENCE

Please provide information on the following person:

Resident Name:	_____	Current Resident?	_____
Address:	_____	Move In Date:	_____
	_____	Approximate Move Out Date:	_____

	Yes	No
Was the resident on a written rental agreement?	<input type="checkbox"/>	<input type="checkbox"/>
Was proper notice given?	<input type="checkbox"/>	<input type="checkbox"/>
Any documented damages? If yes, explain:	<input type="checkbox"/>	<input type="checkbox"/>
Has the resident paid all monies owed? If not, please list amount owed: Rent: _____ Damages: _____ Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
Did resident have any NSF checks? If yes, how many in the last year of tenancy?	<input type="checkbox"/>	<input type="checkbox"/>
Did the resident have any 3 day notices to rent or quit? If yes, how many in the last year of tenancy?	<input type="checkbox"/>	<input type="checkbox"/>
Did the renter comply with their rental agreement? If not, please explain:	<input type="checkbox"/>	<input type="checkbox"/>
Did you ask the tenant to vacate the unit? If yes, please explain:	<input type="checkbox"/>	<input type="checkbox"/>
Would you re-rent to the resident?	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments:

Your Name: _____ Your Position: _____

PLEASE RETURN FAX TO TAHOE RENTAL CONNECTION AT 530-542-2906
Phone us if you have any questions at 800-542-2100 or 530-542-2777

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Applicant Signature: _____

Print Name: _____

Date: _____