

APPLICATION TO RENT: A complete Grow Properties' Rental Application is required for each proposed resident 18 years of age or older along with a \$35 non-refundable application fee per Applicant. Incomplete applications will not be processed, nor will the Applicant be considered for the available unit. Applications should be submitted **in person** at our office. The following items are a list of required application documents.

- ✓ Complete application for each adult 18 years of age or older
- ✓ Bring your photo ID so that we may verify your identity prior to processing
- ✓ Proof of income
 - Three most recent paystubs
 - If self-employed, two most recent tax returns and three most recent bank statements (personal and business)
 - Proof of earnings from social security, child support, alimony or spousal support must be documented
- ✓ Signed employment and rental reference forms. **Complete only the top portion of the forms where you print your name, sign and date.**
- ✓ Non-refundable \$35 processing fee for each application, which can be paid on our website OR by personal check or cash.
- ✓ Holding Deposit of 25% of monthly rent paid in a cashier's check payable to Grow Properties. See Holding Deposit Policy section below for details.

PERSONALLY VIEW THE UNIT: Grow Properties requires that each Applicant who will be residing in the unit views the unit prior to submitting an application. Sight unseen applications will not be considered. If you have extenuating circumstances, please contact the office.

QUALIFICATION STANDARDS: Grow Properties reviews credit history, rental history and the ability to pay rent as a means to qualify Applicants. To qualify for the available unit, Applicants must have a minimum of:

- Two (2) years established credit history in good standing with a minimum credit score of 650.
- Five (5) years verifiable references from past and previous landlords. Rental history from relatives, friends, co-workers or sub-letting will not be considered verifiable.
- Gross household income of three times the monthly rent. All income must be verifiable and must have been stable for at least six (6) months.

CURES: If the Applicant does not meet the qualification standards, in some cases, an increased security deposit or a guarantor/co-signer may be used to cure the deficiency at the sole discretion of Grow Properties. If you know you do not meet the qualification standards, please contact Grow Properties to discuss prior to submitting your application.

BANKRUPTCY, EVICTION, JUDGEMENTS, ETC.

- **Bankruptcy:** May be cured by an increased security deposit or guarantor if the bankruptcy has been discharged and occurred at least five (5) years ago and all other current credit obligations are in good standing. If the bankruptcy is within the last five (5) years, the Applicant will not qualify.
- **Eviiction:** Applicants with unlawful detainers for any reason, will not qualify.
- **Judgements:** Applicants with outstanding judgements will not qualify. If Applicant pays judgement and provides proof of payment to Grow Properties, a guarantor or higher security deposit may be required.

GUARANTOR QUALIFICATION POLICY: Guarantors must have five (5) years of established credit history with a score of 700 or higher, verifiable monthly gross income must be at least five (5) times the monthly rent and must have been stable for at least six (6) months, and verifiable residence history of at least five (5) years.

HOLDING DEPOSIT: Grow Properties processes applications on a first come/first qualified basis. Once a *complete* rental application package is received, the premises will be taken off the rental market and reserved for the Applicant. At that point, all of Applicants will be turned away. For this reason, a holding deposit equal to 25% of the current marketed monthly rent is required with the completed rental application and associated documents. The deposit will be applied to the first month's rent upon approval of the application. If Grow Properties is unable to verify any of the information in the application within three business days, the application may be declined and the rental unit placed back on the rental market. If the application is declined for any reason, the Holding Deposit will be refunded in full within five business days.

If the application is approved and the Applicant fails to sign the rental agreement within two business days OR the Applicant backs out for any reason, "lost rental damages" per the attached Holding Deposit Agreement will be deducted from the Holding Deposit. Therefore, the Applicant should not submit an application unless they are certain that they want the unit.

The holding deposit must be paid in cashier's check made payable to Grow Properties and may not be included in the same payment as the Application Fee. Please see the attached sample Holding Deposit Agreement for all details of the holding deposit terms. Should you have any questions, contact our office.

APPLICATION ACCEPTANCE: If Grow Properties approves Applicant, within 2 business days of verbal approval, Applicant agrees to execute lease agreement and pay security deposit and one full month of rent. Grow Properties will not perform signings via fax, mail or overnight service. If Applicant does not execute lease agreement and pay rent and deposit, Grow Properties will place the rental unit back on the market. The Applicant's Holding Deposit will be returned minus "lost rental damages" per the terms of the Holding Deposit Agreement.

SMOKING POLICY: No smoking of any substance is allowed on the Premises or common areas. If smoking does occur on the Premises or common areas, (i) Tenant is responsible for all damage caused by the smoking including, but not limited to stains, burns, odors and removal of debris; (ii) Tenant is in breach of this Agreement; (iii) Tenant, guests, and all others may be required to leave the Premises; and (iv) Tenant acknowledges that in order to remove odor caused by smoking, Landlord may need to replace carpet and drapes and paint the entire premises regardless of when these items were last cleaned, replaced, or repainted. Such actions and other necessary steps will impact the return of any security deposit. The Premises or common areas may be subject to a local non-smoking ordinance.

Applicant acknowledges having read the foregoing information and hereby submits an application and agrees to all of the terms and conditions herein.

Applicant's Signature

Applicant's Name (please print)

Applicant's Address

Applicant's Phone Number

Applicant's Signature

Applicant's Name (please print)

Applicant's Address

Applicant's Phone Number

Date

Applicant's Signature

Applicant's Name (please print)

Applicant's Address

Applicant's Phone Number

Applicant's Signature

Applicant's Name (please print)

Applicant's Address

Applicant's Phone Number

Owner/Agent

Tenant
 Guarantor

Name of Applicant: _____

APPLICATION TO RENT

(All sections must be completed) **Individual applications required from each occupant 18 years of age or older.**

Last Name		First Name		Middle Name		Social Security Number or ITIN		
Other names used in the last 10 years				Work phone number ()		Home phone number ()		
Date of birth		E-mail address				Mobile/Cell phone number ()		
Photo ID/Type		Number		Issuing government		Exp. date	Other ID	
1.	Present address					City	State	Zip
Date in		Date out		Landlord Name			Landlord phone number	
Reason for moving out						Current rent \$ /Month		
2.	Previous address					City	State	Zip
Date in		Date out		Landlord Name			Landlord phone number	
Reason for moving out						Rent at move-out \$ /Month		
3.	Next previous address					City	State	Zip
Date in		Date out		Landlord Name			Landlord phone number	
Reason for moving out						Rent at move-out \$ /Month		
Proposed Occupants: List all in addition to yourself	Name			Name				
	Name			Name				
	Name			Name				
Do you have pets?	Describe			Do you have a waterbed?	Describe			
How did you hear about this rental?								
A.	Current Employer Name			Job Title or Position			Dates of Employment	
Employer address				Employer/Human Resources phone number ()				
City, State, Zip				Name of your supervisor/human resources manager				
Current gross income		Check one						
\$		Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year						
B.	Prior Employer Name			Job Title or Position			Dates of Employment	
Employer address				Employer/Human Resources phone number ()				
City, State, Zip				Name of your supervisor/human resources manager				
Other income source _____ Amount \$ _____ Frequency _____								
Other income source _____ Amount \$ _____ Frequency _____								



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- Tenant
- Guarantor

Name of Applicant:

Name of your bank	Branch or address	Account Number	Type of Acct

Please list ALL of your financial obligations below.

Name of Creditor	Address	Phone Number	Monthly Pmt. Amt.
		()	
		()	
		()	
		()	
		()	
		()	
		()	

In case of emergency, notify:	Address: Street, City, State, Zip	Relationship	Phone
1.			
2.			

Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				
2.				

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Other motor vehicles: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____



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- Tenant
- Guarantor

Name of Applicant:

NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT

Landlord does not intend to request an investigative consumer report regarding the Applicant.

Unless the box above is checked, Landlord intends to request an investigative consumer report regarding the Applicant's character, general reputation, personal characteristics, and mode of living. Under Section 1786.22 of the California Civil Code, the files maintained on you by the investigative consumer agency shall be made available to you during business hours and on reasonable notice, provided you furnish proper identification, as follows: (1) You may appear at the investigative consumer reporting agency identified below in person, (2) you may make a written request for copies to be sent by certified mail to a specified addressee, or (3) you may make a written request for a summary of the file to be provided over the telephone. The agency may charge a fee, not to exceed the actual duplication costs, if you request a copy of your file. The agency is required to have personnel available to explain your file to you, and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. If you are accompanied by a person of your choosing, the agency may require you to furnish a written statement granting permission to the investigative consumer reporting agency to discuss your file in the other person's presence. The agency that will prepare the report(s) identified in this section is listed below:

Name of Agency

Address of Agency

If you would like a copy of the report(s) that is/are prepared, please check the box below:

I would like to receive a copy of the report(s) that is/are prepared

If the box above is checked, Landlord agrees to send the report to Applicant within three (3) business days of the date the report is provided to Landlord. Landlord may contract with another entity to send a copy of the report.

Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agrees to furnish additional credit references upon request. Applicant authorizes Landlord to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history and employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or subsequent Landlords.

Landlord will require a payment of \$ 35.00 , which is to be used to screen Applicant.

The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports	\$ <u>5.70</u>
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs)	\$ <u>29.30</u>
3. Total fee charged	\$ <u>35.00</u>

The undersigned Applicant is applying to rent the premises designated as:

Apt. No. _____ Located at _____

The rent for which is \$ _____ per _____. Upon approval of this application, and execution of a rental/lease agreement, the applicant shall pay all sums due, including required security deposit of \$ _____, before occupancy.

Date

Applicant (signature required)



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Tenant
 Guarantor

Name of Applicant: _____

RECEIPT FOR TENANT SCREENING AND/OR CREDIT CHECKING FEES

On _____, Landlord received \$ 35.00 from the undersigned, hereinafter called "Applicant,"
(Date)
who offers to rent from Landlord the premises located at:

_____, Unit # (if applicable) _____
(Street Address)
_____, CA _____
(City) (Zip)

Payment is to be used to screen "Applicant". The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports	\$ 5.70
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs)	\$ 29.30
3. Total fee charged (cannot exceed the amount fixed by law)	\$ 35.00

For Landlord Use Only

Screening fees paid by: Cash Personal Check Cashier's Check Money Order

Credit Card # (Last 4 digits only) _____ MC/VISA/AMEX Expiration Date: _____

Landlord by _____, Grow Properties Agent for Landlord
Individual Signing for Landlord Management Co. (If Applicable)

Date

CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

The California Apartment Association supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

The California Apartment Association reaffirms its belief that equal opportunity can best be accomplished through effective leadership, education, and the mutual cooperation of owners, managers, and the public.

Therefore, as members of the California Apartment Association, we agree to abide by the following provisions of this Code for Equal Housing Opportunity:

- We agree that in the rental, lease, sale, purchase, or exchange of real property, owners and their employees have the responsibility to offer housing accommodations to all persons on an equal basis.
- We agree to set and implement fair and reasonable rental housing rules and guidelines and will provide equal and consistent services throughout our residents' tenancy.
- We agree that we have no right or responsibility to volunteer information regarding the racial, creed, or ethnic composition of any neighborhood, and we do not engage in any behavior or action that would result in "steering."
- We agree not to print, display, or circulate any statement or advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.



RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of Applicants for rental housing.
- The Owner/Agent requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. **Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)**

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Rental Applicant Reference Form. I hereby acknowledge that the Owner/Agent can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (_____) _____

Signature _____ Date _____

TO BE COMPLETED BY OWNER/AGENT

2. Person requesting the rental reference

Name of Owner/Agent Grow Properties

Address 3301 C Street, Building 1000 Unit # _____

City Sacramento State CA Zip 95816

Phone number (916) 452-4679 Email: contact@growproperties.com

3. Applicant's rental information

Name of rental community (if any) _____

Address of rental unit _____ Unit # _____

City _____ State _____ Zip _____

Name of Owner/Agent _____

Phone number (_____) _____ Fax number (_____) _____

Move-in date: Month _____ Year _____ Move-out date: Month _____ Year _____ or current resident

TO BE COMPLETED BY FORMER OR CURRENT OWNER/AGENT

4. Rental reference information

Did Applicant live at your property during the period indicated above? Yes No. Last effective monthly rent? \$ _____

If no, what were the dates of occupancy? From (month/year): _____ / _____ To (month/year): _____ / _____

How many times during the past 12 months did Applicant pay the rent late? 0 1-2 3-5 6 or more

Was any check from Applicant returned due to non-sufficient funds (NSF)? Yes No

Did you ever file for an unlawful detainer against Applicant for unpaid rent? Yes No

If yes, what was the result? _____

Does Applicant owe any amount for delinquent rent, utilities or damage to unit? Yes No

Did Applicant provide notice for ending tenancy according to the terms of the rental agreement? Yes No

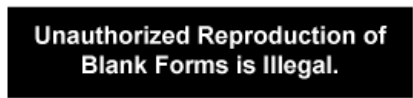
Not applicable because Applicant still resides at unit

Did you ever serve a Three Day Notice to Applicant Yes No

If yes, please explain: _____

Information provided by: Name _____ Phone number (_____) _____

Information obtained by: Phone Mail Fax



EMPLOYMENT VERIFICATION FORM

- This form is used to obtain information regarding the employment history of Applicants for rental housing. The information provided by the current or former Employer may be used solely for the purpose of evaluating the application for rental housing.
- The Landlord requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. **Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)**

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Employment Verification Form to the Landlord listed below.
I hereby acknowledge that the Landlord can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (_____) _____

Signature _____ Date _____

TO BE COMPLETED BY LANDLORD

2. Person requesting the employment reference

Name of Landlord Grow Properties

Address 3301 C Street, Building 1000 Unit # _____

City Sacramento State CA Zip 95816

Phone number (916) 452-4679 Email: contact@growproperties.com

3. Applicant's employment information:

Present **OR** Prior Occupation (check one)

Employer Name _____

Employer Address _____

City _____ State _____ Zip _____

Supervisor's/HR Manager's Name _____ Employer/HR Phone number (_____) _____

Beginning and Ending Dates of Employment _____

Current Gross Income (if applicable) \$ _____

TO BE VERIFIED BY CURRENT OR FORMER EMPLOYER

4. Employment information verification

Is the information provided in Section 3 above correct?

Employer Name	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Employer Address	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Supervisor's/HR Manager's Name	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Employer/HR Phone Number	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Beginning and Ending Dates of Employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Current Gross Income (if applicable)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Verification provided by:

Name: _____

Title: _____

Phone: (_____) _____

If No, please explain: _____

Verification obtained by:

Phone Mail Fax

