

## ALL QUESTIONS BELOW MUST BE ANSWERED COMPLETELY. INCOMPLETE APPLICATION MAY BE DENIED.

APPLICANT INFORMATION – One Application	n Per Adult	Applicant	·											
APPLICANT'S NAME								TELEP	HONE NUMBER			EMAI	L ADDRESS	
SOCIAL SECURITY NO. DRIV			VER'S LICENSE NO. & STATE				BIRTHDA		DATE	ATE		MARITAL STATUS		
RESENT ADDRESS					APT NO	O. C	CITY			STATE		ZIP		
IOW LONG AT THIS ADDRESS RENT/OWN			MANAGER'S NAME / MORTGAGE COMPANY						PRESENT LANDLORD'S PHONE NO.					
PREVIOUS ADDRESS				D. C	. CITY		STA		STATE		ZIP			
HOW LONG AT THIS ADDRESS RENT/OWN			MANAGER'S NAME / MORTGAGE COMP				NY (IF OWNED)			PREVIOUS LANDLO		NDLOF	RD'S PHONE NO.	
HOME ADDRESS			.1			CITY			ST		STATE		ZIP	
PARENT'S NAME			ADDRESS								PHONE NO.			
TOTAL NUMBER OF PERSONS (ROOMMAT	TES) WHO	WILL LIV	E IN THIS	APARTMENT										
NAME OF PERSONS WHO WIL	L LIVE IN	THIS AP	ARTMENT				BIR	THDAT	E				PHONE NO.	
EMPLOYMENT PRESENT EMPLOYER					PHONE	- NO		HOW LONG?			ANNUAL		COME	
EMPLOYER ADDRESS		CITY			STATE				ZIP CODE		SUPERVISO			
PREVIOUS EMPLOYER		POSITIO	ıN		PHONE		NO. OF YEARS		ANNUAL					
PREVIOUS EMPEOTER		FOSITIO	714		FIIONE	. NO.		NO. OF TEARS		ANNOA		AL III	CONIC	
OTHER SOURCES OF INCOME NAME OF BANK		LOCATION	ON			CHECKI	NG A	ACCOU	NT NO.	SAV	INGS A	CCOU	NT NO.	
ADDITIONAL INCOME-DESCRIBE SOURCE	AND HOV	V TO VER	RIFY							AMC	UNT PI	ER YE	AR	
PERSONAL PERSON TO CALL IN CASE OF EMERGENCE	CY RE	LATIONS	SHIP	ADDRESS								PHON	NE NO.	
VEHICLE MAKE / MODEL	CC	DLOR				YEAR						LICENSE PLATE NO.		
HOW WERE YOU REFERRED TO KELTON	TOWERS /	APARTMI	ENTS?											
HAVE YOU EVER BEEN EVICTED OR OTHE	ERWISE FO	ORCED T	O LEAVE	YOUR RESIDENCE	E? IF YE	S , PLEASI	E EX	PLAIN.						
I, the undersigned, have agreed to months, starting the Deposit of \$	Rent/Le		day of	bedroo	20	0	_, 8	at the	Rental Rate	of \$	lability	<u>/</u> , at 5	515 Kelton Ave., for the term o	
	OT be described on the description of the descripti	lelivered the Re age "B" ery occi Securit	d to me ntal App and a upant, s	and I shall hav blication, The L accompanying igned, NOTAR sit and Credit C	re NO release are Guaran RIZED,	right to med The Hotor's Created and returned	lous edit urne	se Ru Appliced to the end of the	les have been cation have be he office of the did in full, and he	signed een co e Mana	by all implet ager a	occu ed w t 515	<u>upants;</u> ithout modification by each and Kelton Ave., Los Angeles, C <i>l</i>	
I FURTHER AGREE THAT IN TH RELETTING THE APARTMENT OF THE ABOVE, I AGREE T BECOME NON-REFUNDABLE AN APARTMENT HAS BEEN RE-REN	AND THAT A	HAT S	UCH EX	XPENSE IS D PLACED BY M	DIFFICU ME TO	JLT TO I SECUR	EST E,	IMAT RENT	E AT THIS TII OR LEASE	ME. IN SAID	THE APA	EVEI RTM	NT OF MY BREACH OF ANY ENT SHALL IMMEDIATELY	
I hereby authorize all holders of in information that it may require for credit report, contacting current and the original and will suffice as an at for its efforts to determine my credit	oformation the purified previously thorized	pose of ous en d signa	f a crec oployers ture to r	dit verification and landlord elease informa	and to ds. I also ation on	ransactionso agreements represented to the comments of the com	on. e th	This a	includes runni photo copy	ng a or fax	persor	nal Tof this	FRW, Trans Union, and/or CB document shall be as valid as	
Applicants Signature:										Date:				

