

RENTAL APPLICATION

Application will not be processed unless completed in full / Prices are subject to change without notice

Rental Address:				
Desired Move in Date:				
TENANT INFORMATION Phone #:		Email		
Last Name:				
Social Security #:	Birthdate:	Drivers License #:		State:
CURRENT Address:	Apt #:	City:	State:	Zip:
Name of Landlord/Apartment Complex:				
Landlord Phone #:	Rent Amount:	Residency	Dates From:	to
PREVIOUS Address:	Apt #:	City:	State:	Zip:
Name of Landlord/Apartment Complex:				
Landlord Phone #:	Rent Amount:	Residency	Dates From:	to
CURRENT EMPLOYER:		Phone #:	Supervis	or:
Address:	City:	State: Zip:	Position	l
Monthly Income:	Employ	ed From:	to	
<u>CO-APPLICANT/SPOUSE</u> Phone #:		Email		
Last Name:	First:	Middle:	Please circle	f applies: Jr, Sr, I, II
Social Security #:	Birthdate:	Drivers License #:		State:
CURRENT Address:	Apt #:	City:	State:	Zip:
Name of Landlord/Apartment Complex:				
Landlord Phone #:	Rent Amount:	Residency	Dates From:	to
PREVIOUS Address:	Apt #:	City:	State:	Zip:
Name of Landlord/Apartment Complex:				

Landlord Phone #:	Rent Amoun	t:	Residency Dates From: to		
CURRENT EMPLOYER:		Phone #:		Supervi	sor:
Address:	City:	State:	Zip:	Positio	n
Monthly Income:		Employed From: _		to	
List <u>ALL</u> individuals that will be occu NAME	pying the residence:	RELATION	ISHIP		D.O.B.
Have you or the co-applicant broken a rental ag	reement?Yes / No	Have you or the co-appli	cant been evicted	l?Yes / No	
Have you been convicted of a drug related crim	e?Yes / No	Have you been convicted	l of a felony?	Yes / No	
Will there be any pets at the residence? NAME (pet) <u>TYPE</u>		<u>WEIGHT</u>	LICENSE	E NUMBER	COLOR
How many vehicles do you plan to park on prop <u>MAKE</u> <u>MODEI</u>		YEAR	COLOR	<u>STATE</u>	LICENSE #
In case of emergency notify:					
Name	Address		Relationship]	Phone #
PLEASE READ CAREFULLY: This application must be signed by applicants be upon landlord until approval by landlord. If lar Under no condition will the application fee be r landlord. Properties will be held for a maximur I the undersigned, do hereby authorize $R \cdot A \cdot N$ concerning my income, mode of living, credit a purposely misrepresented will result in the deni	adlord or agent rejects the eturned. If applicant sho n of 10 days when a hole Realty & Property nd character for the purp	e application all deposit n puld withdraw after 72 ho ling deposit is accepted. Management to inves	nonies will be re ours of placing a tigate the informa	funded less non-refu deposit, a minimum ation supplied by me	ndable application fee of \$50.00 of \$100.00 will be retained by on the rental application
				DATE	
Applicant's Signature				2.112.	

Co-Applicant's Signature

Note: All move-in money must be in Cashier's Check or Money Order – this includes: rent, tax, deposits, administration fee and application fee. Make checks payable to: <u> $R \cdot A \cdot N$ Realty & Property Mangement.</u>

R·A·N Realty & Property Management, 3707 E. Southern Ave # 1083, Mesa, AZ 85206 / (480)844-0600, fax (480) 844-9746

DATE:

INSTRUCTIONS FOR TURNING IN APPLICATION

- 1. \$50 Cashiers Check or Money Order per applicant.
- 2. Clear Copy of your driver's license.
- 3. Copy of Social Security Card.
- 3. Rental Application filled out completely.
- 4. Bring to R·A·N Realty & Property Management, 3707 E. Southern Ave # 1083 Mesa, AZ 85206, Southeast Corner Val Vista and Southern in Regus building
- 5. When you have turned in your application call 480-844-0600, fax 480-844-9746
- 6. If you receive notification of acceptance you must make arrangements within 24hrs to bring in your security deposit.

Acceptance: If you received notification of acceptance you must: 1. Within 24 hours, bring your security deposit in cashier's check or money order to our office so the property can be taken off the market. 2. Call or email our office to make arrangement to sign the lease. 3. Make arrangement to have utilities put in your name in order to have electric, gas, water, sewer, etc, when you move in.

RENTAL CRITERIA

- 1. Credit Check
 - A. Judgments from apartment communities or property management companies are grounds for automatic denial of application.
 - B. If credit report contains a bankruptcy it must be satisfied at time of application.
 - C. Too much negative credit is grounds for denial of application.
- 2. Rental History
 - A. 12 Month's Rental history (Verifiable through an apartment community or a property Management company.)
 - B. No more than One (1) NSF check. (All applicable late charges and fees must have been paid.)
 - C. No more than Two (2) late rental Payments. (All applicable late charges and fees must have been paid.
 - D. A 30-Day Notice to Vacate must have been given, if required by previous landlord.
 - E. No legal notices served (Ten-day Notice for non compliance or Five-day Notice for Health and Safety.)
- 3. Employment
 - A. Must be currently employed or provide another source of income.
 - B. Must have verifiable income (gross) equal to at least three (3) times the monthly rent, applicable to the size and lease terms for which you are applying.
- 4. Criminal Background Check
 - A. Applicants with felony backgrounds may be subject to denial of application.
- 5. Honesty
 - A. Any false or misleading information on application or spoken to agent is grounds for Automatic denial of application.



Mesa, AZ 85206 Office: 480-844-0600 Fax: 480-844-9746

RESIDENCY VERIFICATION REQUEST

Date:							
То:		Fax:					
We would appreciate your assistance with providing a rental verification on							
		folle	owing				
NAME:							
ADDRESS			UNIT #				
DATES OF RESIDENCY		TO					
*****	*******	******	*****	****			
Rental amount:	\$		_monthly				
Paid on time?	Yes	No					
If no, # of times late and/or NSI	payments						
Complaints or Problems? Y	esNo						
If yes, please explain							
Cleaning/Damage charges? Y	esNo						
Amount owed (if any)	\$						
Paid		_No					
Fulfilled Lease?		_No					
Any legal notices?	Yes	_No					
If yes, please explain							
Would you re-rent? Y	esNo						
false information, we may reject this application	e of your application n, retain all fees and o	are true and o deposits as liq	uidated damages for our time and	NG AGENT ify same. If you fail to answer any questions or give d expense, plus terminate your right to occupancy.			

False information, we may reject this appreation, retain an rees and deposits as inquidated damages for our time and expense, plus terminate your right to occupancy. False information is a serious criminal offense. Any lawsuits relating to this application or lease contract the prevailing party may recover all attorney and litigation costs from the losing party. We may at any time furnish information to consumer reporting or rental housing owners regarding the compliance of the lease contract, rules and obligations.

rev 12/13/2021 complete rental application jm



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То:					
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ADDRESS				UNIT #	_
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*****	*****	******	******	******	*
Rental amount:		\$		monthly	
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Complaints or Problems? Y	les	No			
If yes, please explain					
Cleaning/Damage charges? Y	les	No			
Amount owed (if any)		\$			
Paid		Yes	No		
Fulfilled Lease?		Yes	No		
Any legal notices?		Yes	No		
If yes, please explain					
Would you re-rent?	les	No			
FROM:				MARKETING/LEASING A	
You declare that all your statements on this pa false information, we may reject this application					

You declare that all your statements on this page of your application are true and complete. You authorize us to verify same. If you fail to answer any questions or give false information, we may reject this application, retain all fees and deposits as liquidated damages for our time and expense, plus terminate your right to occupancy. False information is a serious criminal offense. Any lawsuits relating to this application or lease contract the prevailing party may recover all attorney and litigation costs from the losing party. We may at any time furnish information to consumer reporting or rental housing owners regarding the compliance of the lease contract, rules and obligations.



3707 E. Southern Ave Ste 1083 Mesa, AZ 85206 Office: 480-844-0600 Fax: 480-844-9746

EMPLOYMENT VERIFICATION

TO:	FROM:				
FAX NUMBER:	PHONE NUMBER:	_			
DATE:	TIME:	-			
THIS IS TO VERIFY EMPLOYM	NT FOR:	-			
TO BE FIL	LED OUR BY EMPLOYER-THANK YOU FOR YOUR COOPERATION				
PLACE OF EMPLOYMENT:		_			
POSITION:	ON:LENGTH OF EMPLOYMENT:				
		_			
COMMENTS:					
		_			
		_			
PERSON VERIFYING INFORMA	`ION:	-			
POSITION:		-			
SIGNATURE:	DATE:				
	*************	***			
SIGNATURE OF EMPLOYEE	SOCIAL SECURITY NUMBER DATE	-			



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PLACE OF EMPLOYMENT:					
	LENGTH OF EMPLOYMENT:				
COMMENTS:					
PERSON VERIFYING INFORM	ATION:				
SIGNATURE:	DATE:				
SIGNATURE OF EMPLOYEE	SOCIAL SECURITY NUMBER DATE				