



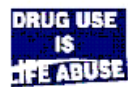
Established 1976

Sullivan Property Management

An Orange County Apartment Management Company

STATEMENT OF RENTAL POLICY

1. **WE ARE AN EQUAL OPPORTUNITY HOUSING PROVIDER.** We fully comply with the Federal Fair housing Act. We do not discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin. We also comply with all state and local fair housing regulations.
2. **APARTMENT AVAILABILITY POLICY.** We update our list of available apartments, as each apartment becomes available. An apartment that was unavailable in the morning may become available later that same day.
3. **OCCUPANCY GUIDELINES.** To prevent overcrowding and undue stress on plumbing and other building systems, we restrict the number of people who may reside in an apartment. In determining these restrictions, we adhere to applicable fair housing guidelines. We allow two persons per bedroom plus one additional person per apartment. For example, a one-bedroom apartment could house three people, and a two-bedroom apartment could house as many as five people.
4. **APPLICATION PROCESS.** We evaluate every apartment application in the following manner. You must submit a rental application and answer all questions on the form. You must pay the \$30.00 per person nonrefundable application fee. We will determine whether, from your responses to the application questions, if you qualify for the apartment you are applying for. If you do not, we will reject your application. If you do qualify, we process your application, which will check your credit report, employment and rental references to confirm that they meet our rental criteria. If you meet our criteria, we will approve your application.
5. **RENTAL CRITERIA.** To qualify for an apartment you must meet the following criteria:
 - a. **INCOME.** Your monthly income must be at least two and a half (2.5) times the monthly rent.
 - b. **RENTAL HISTORY.** You must have satisfactory rental references for the last two (2) years. If you have ever been evicted or sued for any lease violation, your application will be denied.
 - c. **CREDIT HISTORY.** Your credit record must be satisfactory.
 - d. **GUARANTORS.** If you do not meet one or more of the above criteria, you may be able to qualify for an apartment if you can get a third party to guarantee your lease. The guarantor must pass the same application and screening process that you must pass, except that we will deduct the guarantor's own housing costs before applying his or her income to our income standard.





Established 1976

SULLIVAN PROPERTY MANAGEMENT

APPLICATION TO RENT

Individual application required from each occupant 18 years of age or older. ALL SECTIONS MUST BE COMPLETED: Present and Previous Address must add up to 5 years or longer

(Enter Information Below the Line)

Last Name First Name Middle Name Social Security Number

Date of Birth Driver's License Number State Home Phone Number

Cell Phone Number Work Phone Number E-Mail Address

Present Address City State Zip

Date In Date Out Owner/Manager Name (circle one) Owner/Manager Phone Number

Reason for Moving

Previous Address City State Zip

Date In Date Out Owner/Manager Name (circle one) Owner/Manager Phone Number

Reason for Moving

List All Persons other than Yourself that will be Living in Unit

Name DOB Name DOB

Name DOB Name DOB

Name DOB Name DOB

Job Title Salary ___ Weekly Company Name
\$ ___ Monthly

How Long with this employer Phone Number Company Address

Name of Supervisor City State Zip

Prior Job or Second Job Salary ___ Weekly Company Name
\$ ___ Monthly

How Long with this employer Phone Number Company Address

Name of Supervisor City State Zip

Account Number Bank Name City Balance

Checking

Saving



Name of Credit Cards or Creditors	Balance
1.	
2.	
3.	

In case of emergency, notify:	Relationship
Address	City State Zip Phone Number

Personal References	Phone Number
Address	City State Zip

Personal Reference	Phone Number
Address	City State Zip

Will you have a Pet? Describe:

Do you need a reasonable accommodation? Describe:

Liquid filled furniture? Describe:

Have you ever filed bankruptcy? What Year?

Why?

Have you ever had a court eviction filed against you or been asked to move? (Explain)

Have you ever been convicted of a crime against a person or property? (Explain)

Have you ever used other names?	If so list
Automobile	Make Model Year License Number
Automobile	Make Model Year License Number
Automobile	Make Model Year License Number

I am applying to live at _____ Apt # _____

I would like to move in on (Date) _____ Monthly Rent _____ Security Deposit _____

How did you hear about this property? (Circle One) Sullivan's Web site, Craig's List, Drive By, or Other _____

Application process fee is a non-refundable \$30.00 per person for any person 18 years or older.

The amount charged is itemized as follows:

a. Actual cost of credit report, unlawful detainer (eviction) search and/or other screening reports \$ _____

b. Cost to obtain, process and verify screening information (may include staff time and other soft costs)... \$ _____

MAKE MONEY ORDERS PAYABLE TO SULLIVAN PROPERTIES INC. NO PERSONAL CHECKS
(Office use: Paid _____ MO _____ Cash)

Applicant represents that the statements above and on the reverse side of this form are true and correct and hereby authorizes verification of items including but not limited to the obtaining of tenancy and credit reports and agrees to furnish additional credit references or other information upon request. Applicant certifies under penalty of perjury that the foregoing is true and correct, and authorizes owner or his agents to obtain applicant's tenancy, credit and criminal history reports, and further authorizes owner and his agents to investigate the information provided herein, and that any material misstatement will at owner's option be a material and non-curable breach of any subsequent rental agreement and grounds for immediate eviction.

DATE: _____ APPLICANT: _____



Employment Verification

Authorization for Release of Information

I warrant and represent the information provided on this application to be true and correct. The applicant understands that, if accepted, the subsequent discovery of a false or misleading statement during the application process is grounds for termination of the rental agreement by a 3 day notice to quit. The management company, the owners of the rental premises, and/or its contractors, or agents, hereinafter referred to as: "The Management", are hereby authorized to make any investigations of my consumer and/or commercial credit, employment, rental litigation, unlawful detainer history and criminal history and records as they may deem appropriate in connection with this application of the subject rental premises and extension of credit. I release all parties from liability for any damage that may come from furnishing such information. I understand and further acknowledge that the management and their contractors and agents make no warranty or representation, express or implied, regarding the completeness, accuracy or content of any such information received, assembled, compiled, summarized or reported back from any such third party source to the management and/or the applicant. I further authorize the management to periodically run related inquiries both during and for the reasonable time following the term of any rental or lease period, for the purpose of assessing the applicant's continuing rental/leasing verifications and to assist in the collection of any unpaid balances due the management. This form may be photocopied or reproduced as necessary by the management and/or its contractors and agents to be used as my consent to release credit, rental, financial, personal, commercial, litigation, business and other personal history.

Applicant Name

Signature

Date

For Office Use Only

VERIFIED BY: _____ TITLE: _____
COMPANY NAME AND ADDRESS: _____
DATE HIRE: _____
JOB TITLE: _____
INCOME: _____ (HR. MO. YR.) COMMISSION/TIPS: \$ _____

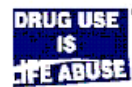
Thank you for your time in filling this out for our records.

Fax to: _____

Scan to: _____

Completed By: _____ Date: _____

Signature: _____



Residential Verification

Authorization for Release of Information

I warrant and represent the information provided on this application to be true and correct. The applicant understands that, if accepted, the subsequent discovery of a false or misleading statement during the application process is grounds for termination of the rental agreement by a 3 day notice to quit. The management company, the owners of the rental premises, and/or its contractors, or agents, hereinafter referred to as: "The Management", are hereby authorized to make any investigations of my consumer and/or commercial credit, employment, rental litigation, unlawful detainer history and criminal history and records as they may deem appropriate in connection with this application of the subject rental premises and extension of credit. I release all parties from liability for any damage that may come from furnishing such information. I understand and further acknowledge that the management and their contractors and agents make no warranty or representation, express or implied, regarding the completeness, accuracy or content of any such information received, assembled, compiled, summarized or reported back from any such third party source to the management and/or the applicant. I further authorize the management to periodically run related inquiries both during and for the reasonable time following the term of any rental or lease period, for the purpose of assessing the applicant's continuing rental/leasing verifications and to assist in the collection of any unpaid balances due the management. This form may be photocopied or reproduced as necessary by the management and/or its contractors and agents to be used as my consent to release credit, rental, financial, personal, commercial, litigation, business and other personal history.

Applicant Name

Signature

Date

For Office Use Only

LANDLORD'S NAME: _____
ADDRESS: _____ APT # _____
CITY: _____ STATE: _____ ZIP: _____
VERIFIED BY: _____ PHONE #: _____
PAID ON TIME: YES / NO HOW MANY TIMES LATE: _____
EVER RECEIVED ANY NSF'S: YES / NO HOW MANY: _____
WAS A 30 DAY NOTICE GIVEN: YES _____ NO _____
WOULD YOU RENT TO THEM AGAIN: YES _____ NO _____
ANY PETS? _____
ANY BEDBUG/ROACHES ISSUE WITH TENANT: _____

Thank you for your time in filling this out for our records.

Fax to: _____

Scan to: _____

Completed By: _____ Date: _____

Signature: _____

