

333 Willow Street, #100, Alameda, CA 94501-6175

Website | <http://franapts.com> Email | franciscanapt@ebcglobal.net

Phone | 510.522.5300

Fax | 510.522.4892

FRANCISCAN APARTMENTS

FRANCISCAN APARTMENTS IS A SMOKE-FREE LIVING ENVIRONMENT.

We do not accept co-signers.

REQUIREMENTS FOR RENTAL APPLICATION APPROVAL

The following requirements must be met before your application to rent a property through our office can be accepted:

- 1) **THERE WILL BE A TOTAL FEE OF THIRTY DOLLARS (\$30.00) FOR THE PROCESSING OF EACH APPLICATION. EVERY ADULT 18 YEARS AND OVER MUST SUBMIT AN APPLICATION. THIS FEE IS NON-REFUNDABLE.**
- 2) We will be running a credit report and an unlawful detainer report on each adult through National Credit Reporting. A negative report or a report with discrepancies in comparison to your rental application may cause rejection of your application.
- 3) Each applicant must produce a valid piece of photo identification and social security card and/or pay stub with social security number indicated. The ID must include a photo and current address. This would include a driver's license, military ID, passport, etc.
- 4) We must be able to verify a total monthly combined income of at least 2.75 times the monthly rental amount of the property for which you are applying. Applicant must provide their most recent pay stubs for one month's income or written verification of any income claimed to meet this requirement. This income must have been continuous for at least six (6) months prior to the date of application. Prior employer information may therefore be required.
- 5) We will be contacting your current and previous landlords for a reference. Two good landlord references are required (non-relative references only).

APPLICATION CHECKLIST

- 1) \$30.00 CASH for each applicant.
- 2) 1 photo ID and social security card for each adult.
- 3) Most recent pay stubs for one month's income or written verification of income.
- 4) One fully completed and signed application for each adult over 18.

No application will be accepted if it does not include all items on the checklist.

After the approval of your application, a deposit in the form of a cashier's check or money order will be required within twenty-four (24) hours to hold the apartment. Please note that we will continue to actively rent the apartment if we do NOT receive a deposit within this time period.

Please note that applications will be processed in the order received. In the event that multiple applications have been received at once, the best qualified will receive first consideration.

If you are applying for an apartment in advance of the existing tenant vacating, please be aware that the date the apartment becomes available is subject to change without prior notification due to the existing tenant's schedule and/or the needs of the unit turnover.

ELIGIBILITY DETERMINATION

Applicants may be deemed ineligible based upon these resident selection criteria for the following reasons:

- Failure to present all members of the applicant's household at the scheduled interview(s).
- Failure of any household member to behave in a courteous, respectful, non-violent manner during an interview or while on the property.
- Falsification of any information provided on an application.
- Poor credit history.
- Household income below proscribed limits.
- Failure to provide requested information and proof of income and assets.
- Eviction

Agreed and Accepted by: _____

Tenant

_____ Date

_____ Tenant

_____ Date

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.

PART 1 – PERSONAL INFORMATION & ADDRESS HISTORY

Last Name		First Name		Middle Name		SSN or ITIN	
Other names used in the last 10 yrs.				Work phone number ()		Home phone number ()	
Date of birth		E-mail address				Mobile/Cell phone number ()	
Photo ID/Type	Number	Issuing Gov.	Exp. date	Other ID			
Present address			City	State	Zip		
Date in	Date out	Landlord Name			Landlord phone number		
Reason for moving out					Current rent \$ /Month		
Previous address			City	State	Zip		
Date in	Date out	Landlord Name			Landlord phone number		
Reason for moving out					Rent at move-out \$ /Month		
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



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- Tenant
- Guarantor

Name of Applicant: _____

PART 2 – INCOME

Income from Employment (If no income is received from employment, write N/A)

Current Employer Name	Job Title or Position	Dates of Employment
Employer address	Employer/Human Resources phone number ()	
City, State, Zip	Name of supervisor/human resources manager	
Current gross employment income amount: \$	(check one) Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year	
Prior Employer Name	Job Title or Position	Dates of Employment
Employer address	Employer/Human Resources phone number ()	
City, State, Zip	Name of supervisor/human resources manager	

Income from Other Sources

Other income source _____ Amount \$ _____ Frequency _____

Other income source _____ Amount \$ _____ Frequency _____

PART 3 – ASSETS & LIABILITIES

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. Amount
		()	
		()	
		()	
		()	
		()	



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- Tenant
- Guarantor

Name of Applicant: _____

PART 4 – EMERGENCY CONTACT(S)			
In case of emergency, notify:	Address: Street, City, State, Zip	Relation	Phone
1.			
2.			

PART 5 – REFERENCES				
Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				
2.				

Vehicles		
Automobile #1	Make:	Model:
	Year:	License #:
Automobile #2	Make:	Model:
	Year:	License #:
Other motor vehicles (list all):		

Other Information

Have you ever filed for bankruptcy? No Yes
If yes, explain: _____

Have you ever been evicted or asked to move? No Yes
If yes, explain: _____

Do you have pets? No Yes
If yes, describe: _____

Do you have a waterbed? No Yes
If yes, describe: _____

How did you hear about this rental? _____



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RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of Applicants for rental housing. The information provided by the current or former Owner/Agent may be used solely for the purpose of evaluating the application 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 2. Copies of this form and of the Applicant's signature are acceptable.
- The Applicant may be contacted to verify the authenticity of this request.

1. Person requesting the rental reference

Name of Owner/Agent FRANCISCA APARTMENTS
 Address 333 WILLOW STREET Unit # 100
 City ALAMEDA State CA Zip 94501
 Phone number (510) 572-5300 Fax number (510) 572-4892

2. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Rental Applicant Reference Request to the Owner/Agent listed above. 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 _____

3. Applicant's rental information

Name of rental community (if any) _____ Unit # _____
 Address of rental 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

4. Rental reference information provided by former or current Owner/Agent

Did Applicant live at your property during the period indicated above? Yes No
 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
 Please mail or fax this form to the person listed in section 1 as soon as possible (within 24-48 hours)



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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 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 2. Copies of this form and of the Applicant's signature are acceptable.
- The Applicant may be contacted to verify the authenticity of this request.

1. Person requesting the employment reference

Name of Owner/Agent Franciscan Apartments
Address 333 Willow street Unit # 100
City Alameda State CA Zip 94501
Phone number (510) 522-5300 Fax number (510) 522-4892

2. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Employment Verification Request to the Owner/Agent listed above. 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 _____

3. Applicant's employment information:

- Present OR Prior Occupation (check one)

Employer Name _____

Employer Address _____

City _____ State _____ Zip _____

Supervisor's Name and Phone Number _____ Phone number (____) _____

Beginning and Ending Dates of Employment _____

Current Gross Income (if applicable) \$ _____

4. Employment information verified by former or current Employer

Is the information provided in Section 3 above correct?

- | | | | |
|--|---|------------------------------|-----------------------------|
| <input type="checkbox"/> Present | <input type="checkbox"/> Prior Occupation (check one) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Employer Name | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Employer Address | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Supervisor's Name and 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 |

If No, please explain: _____

Please mail or fax this form to the person listed in section 1 as soon as possible (within 24-48 hours)



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- Tenant
- Guarantor

Name of Applicant:

PART 7 – ICRAA NOTICE

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:

National Credit Reporting

Name of Agency

6830 Via Del Oro, Ste. 105 San Jose, Ca 95119

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.



- Tenant
 Guarantor

Name of Applicant: _____

PART 8 – CONSIDERATION OF CREDIT HISTORY

Important Information, read carefully:

Under California law, applicants with a government rent subsidy have the option, at the applicant's discretion, of providing lawful, verifiable alternative evidence of the applicant's reasonable ability to pay the portion of the rent to be paid by the tenant, including, but not limited to, government benefit payments, pay records, and bank statements.

If an eligible applicant elects to submit such alternative evidence, Landlord will consider that alternative evidence instead of the applicant's credit history.

Option 1: Consideration of Credit History

**Option 2: Alternative Evidence of Ability to Pay
 (This option is ONLY available to government rent subsidy recipients)**

If you either:

- Do NOT have a government rent subsidy OR
- Do have a government rent subsidy but are not choosing to submit alternative evidence of your ability to pay rent to be considered instead of credit history

Read and initial below.

Applicant authorizes the 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.

Applicant's Initials: _____

If you both:

- DO have a government rent subsidy AND
- Are choosing to submit alternative evidence of your ability to pay rent to be considered instead of your credit history

Read and initial below.

Applicant authorizes the Landlord to obtain reports other than credit reports, such reports may include unlawful detainer (eviction) reports, 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.

Application will not be considered complete until Applicant submits their verifiable alternative evidence of the ability to pay.

Applicant's Initials: _____

By signing below, Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agrees to furnish additional references upon request.



- Tenant
- Guarantor

Name of Applicant: _____

To Be Completed By Landlord – Screening Fee Disclosure and Itemization

Landlord will require payment of a fee, which is to be used to screen Applicant. The total amount of the fee is as follows:

Total fee for applications subject to credit history review <i>(Applicable for Applicants who selected Option 1 in Part 8 of this Application)</i>	Total fee for applications subject to review of alternative evidence of ability to pay <i>(Applicable for Applicants who selected Option 2 in Part 8 of this Application)</i>
\$ 30.00	\$ 30.00

The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports, as applicable:

Actual cost for screening reports inclusive of credit history <i>(Applicable for Applicants who selected Option 1 in Part 8 of this Application)</i>	Actual cost for screening reports NOT including credit history <i>(Applicable for Applicants who selected Option 2 in Part 8 of this Application)</i>
\$ 13.00	\$ 13.00

2. Cost to obtain, process and verify screening information (may include staff time and other soft costs)

\$ 17.00

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

Apt. No. _____ Located at _____ 333 Willow Street Alameda CA 94501 _____

The rent for which is \$ _____ per month. 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.

Option to receive receipt by email. *(Landlord check only if applicable)* If box is checked, you can choose to receive a receipt by email. If you would like to have your receipt emailed

to you, please provide your email address here: _____
(Applicant fill in email address, if electing email receipt)

If the box is not checked, or if you do not provide a valid email address, your receipt will be mailed to the present address listed in Part 1 of this Application, or provided personally.

Date

Applicant (signature required)



- Tenant
- Guarantor

Name of Applicant:

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.

