

**PARKSIDE MANAGEMENT COMPANY INC.**  
**1213 14<sup>TH</sup> STREET SUITE 1**  
**MODESTO, CA. 95354**  
**PHONE 209 529-3800**  
**FAX 209 529-4305**

### **GENERAL RENTAL INFORMATION**

Thank you for your interest in one of our rental properties. We have listed what will be required from you to lease one of our units. We do not charge an upfront fee for turning in an application. If your application is selected you will be charged \$35.00 at the time of move in for our application processing.

Upon returning your COMPLETELY filled out application, specifically telephone numbers for us to communicate with you, please provide the following:

- A copy of your driver's license or picture I.D.
- A copy of your most recent pay stub
- Self-Employed: first two pages of your tax return
- A form of verification of any other income you claim to have

We consider the complete application in our decision process. You do not necessarily have to make three times the rent. If you have any delinquencies on your credit report from utility companies, cell phone, bounced checks etc. we will assume you will not be responsible enough to maintain a monthly rent if you can't manage your monthly obligations.

In most cases the minimum lease time is six months.

NO PETS are allowed unless otherwise specified. Non-compliance will result in an immediate notice to move. In the case a pet is accepted, there is an additional deposit of \$300.00. Any dog that resembles a Pit Bull, Rottweiler or Doberman will not be accepted due to insurance stipulations.

A mail slot is available to the right of our iron gate if you are dropping off after hours.

Please call our office if you have any questions.

# APPLICATION AND OFFER TO RENT/LEASE PROPERTY

## PARKSIDE MANAGEMENT COMPANY

PROPERTY ADDRESS \_\_\_\_\_ RENT \$ \_\_\_\_\_

FULL NAME OF APPLICANT #1 \_\_\_\_\_ PHONE # \_\_\_\_\_

SOCIAL SECURITY \_\_\_\_\_ DRIVERS LICENSE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

FULL NAME OF APPLICANT #2 \_\_\_\_\_ PHONE # \_\_\_\_\_

SOCIAL SECURITY \_\_\_\_\_ DRIVERS LICENSE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

### OTHER PERSONS TO OCCUPY RENTAL PROPERTY

NAME _____	RELATIONSHIP _____	AGE _____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### RESIDENCE HISTORY

Current Address _____	Previous Address _____
City/State/Zip _____	City/State/Zip _____
From _____ To _____	From _____ To _____
Name of Landlord _____	Name of Landlord _____
Landlord's Phone _____	Landlord's Phone _____
Rent Paid \$ _____	Rent Paid \$ _____
Reason for Leaving _____	Reason for Leaving _____
_____	_____

### EMPLOYMENT HISTORY

Current Employer _____	Supervisor _____	Start Date _____	Gross Income\$ _____
Employer's Address _____	Supervisor's Phone _____	Position _____	
Previous Employer _____	Supervisor _____	From _____ To _____	Gross Income\$ _____
Spouses Employer _____	Supervisor _____	Start Date _____	
Employer's Address _____	Supervisor's Phone _____		
Position/Title _____	Gross Income \$ _____		

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Signature

**AUTOMOBILES**

Auto Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License No. \_\_\_\_\_ Color \_\_\_\_\_

Auto Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License No. \_\_\_\_\_ Color \_\_\_\_\_

**PERSONAL REFERENCES (NOT RELATED)**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone No. \_\_\_\_\_

How Long Acquainted \_\_\_\_\_ Occupation \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone No. \_\_\_\_\_

How Long Acquainted \_\_\_\_\_ Occupation \_\_\_\_\_

**NEAREST RELATIVE (NOT LIVING WITH YOU)**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone No. \_\_\_\_\_ Relationship \_\_\_\_\_

**IN CASE OF EMERGENCY NOTIFY**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone No. \_\_\_\_\_ Relationship \_\_\_\_\_

HAS ANY CIVIL JUDGEMENT BEEN ENTERED AGAINST YOU IN THE COLLECTION OF A DEBT IN THE PAST(10) YEARS?

\_\_\_ YES \_\_\_ NO

DO YOU HAVE ANY WATER FILLED FURNITURE OR DO YOU INTEND TO GET ANY WATER FILLED FURNITURE IN THE FUTURE?

\_\_\_ YES \_\_\_ NO

DO YOU HAVE ANY PETS OR DO YOU INTEND TO GET ANY PETS?

\_\_\_ YES \_\_\_ NO

HAVE YOU DECLARED BANKRUPTCY IN THE PAST TEN (10) YEARS?

\_\_\_ YES \_\_\_ NO

HAVE YOU EVER BEEN EVICTED?

\_\_\_ YES \_\_\_ NO

HAVE YOU EVER REFUSED TO PAY RENT FOR ANY REASON?

\_\_\_ YES \_\_\_ NO

HAVE YOU EVER LIVED HERE BEFORE OR HAVE YOU EVER KNOW SOMEONE WHO LIVED HERE NOW OR IN THE PAST?

\_\_\_ YES \_\_\_ NO

IF ACCEPTED HOW LONG DO YOU EXPECT TO STAY? \_\_\_\_\_

PLEASE EXPLAIN ANY QUESTIONS THAT ARE ANSWERED YES. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOW DID YOU HEAR OF THIS VACANCY? \_\_\_\_\_



**LANDLORD REFERENCE**

**Please Sign Your Signature Only**

Name of Applicant \_\_\_\_\_  
Name of Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

This will authorize \_\_\_\_\_ (Name of present or past  
Landlord) to release information below regarding my rental history.

X \_\_\_\_\_ X \_\_\_\_\_  
Signature of Applicant      Date      Signature of Applicant      Date

**FOR LANDLORD ONLY**

Length of Residency: from: \_\_\_\_\_ to: \_\_\_\_\_  
Amount of Monthly Rent: \_\_\_\_\_ Rent Owed: \_\_\_\_\_

1. Has their rent ever been late? Y/N. If yes, how many times \_\_\_\_\_
2. Has an Unlawful Detainer ever been filed on this tenant? Y/N
3. Did the tenant keep the unit clean, safe and in sanitary condition? Y/N
4. Has the tenant given a 30 day notice to vacate? Y/N
5. Did the tenant have any pets? Y/N
6. Did the tenant receive their full deposit back? Y/N
7. Would you rent to this tenant again? Y/N

General Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Title \_\_\_\_\_ Phone Number \_\_\_\_\_

**PLEASE FAX TO 209 529-4305**