

RENTAL APPLICATION
ARCTURUS PROPERTY
Tel 805-986-1369 Fax 805-512-7026
Make Checks payable to: Arcturus Property
Mail To: 6520 Platt Ave #107, West Hills CA. 91307

Neatly complete all information below.

Applicants full name _____ Email _____ Phone # _____

DOB _____ Social Security # _____ Drivers License # _____ State _____

Exp. _____ Current Address _____ City _____ State _____

Zip _____ Current Landlords Name _____ Landlords Phone # _____

What Business will you be conducting at our facility _____

Previous Address _____ City _____ State _____ Zip _____

Previous Landlords Name _____ Phone # _____

How long at this address _____ Reason for leaving _____

Your Auto Yr _____ Make _____ Model _____ State/License Plate # _____

Present Employer _____ Position _____ Mo. Income _____

Phone # _____ How long at job _____ Other income/source _____

Employers Address _____ City _____ State _____

Have you ever been party to an eviction? [] Yes [] No If yes what date _____

Name of bank _____ Branch _____ Type of Account _____

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Personal References

Name _____ Yrs. Known _____ Relationship _____ Phone # _____

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Name _____ Yrs. Known _____ Relationship _____ Phone # _____

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at a tenant decision, I understand that the landlord may terminate any rental agreement entered into for any misrepresentations made above.

Signature _____ Date _____

“We require a photocopy of your Drivers license”