

Rental Criteria

Please bring:

- Completed application
- \$30.00 Application fee for each application (Cashier's check or money order)
- Proof of Income for 1 full month

Rental History

- All Rental History must be verifiable and favorable

Income Requirements

Applicant(s) must have verifiable income of at least two and a half times monthly rent. Prior to approval of application must provide documents such as. Pay stubs covering two periods. Court ordered spousal or child support, pension, or prior year's W-2 Tax returns are required when any handwritten documentation is provided as proof of income.

If unemployed or retired, proof of income/ assets must be provided, and must be equal to two and a half times the contractual amount of the lease term.

Credit History

All applications are subject to processing through the designated agency or associate of our choice and must result in no more than 10% negative accounts. NO current collections.

No Bankruptcies within 5 years. Bankruptcies 6 years and older, must show positive payment history thereafter.

No Evictions

Co-Signers

We do not accept co-signers.

Renters' Insurance requirement

The lease agreement of this apartment community contains a financial responsibility requirement. In order to satisfy this requirement, **Prior to move-in**, you must provide evidence of liability insurance coverage that has, at minimum, personal liability coverage with limits of liability in an about not less than \$100,000 per occurrence.

Residents **MUST obtain sufficient renter's insurance to cover the loss of their property.** Residents are also required to obtain sufficient liability coverage to cover accidental damage to landlords' or neighbor's property either caused of affected by resident or residents' guests.

Prospective residents will be required to provide the following before completion of the lease acknowledgement:

1. Name of their insurance provider
2. The policy number
3. Have the apartment community be named as an additional interested party
4. The effective and expiration dates of the policy
5. Coverage that includes residents unit and all other affected units

LEXINGTON PARK

APARTMENTS

Application Consent

Application approvals are based upon how much risk a landlord is willing to accept. The undersigned applicant(s) hereby consent to allow Lexington Park Apartments to obtain a consumer report(s) and to obtain and verify rental history and employment/income for the purpose of application approval.

Applicant

Date

Applicant

Date

Applicant

Date

Applicant

Date

Applicant

Date

LEXINGTON PARK

APARTMENTS

800 East Lexington Avenue El Cajon, CA 92020
Office: 619.441.1190 – Fax: 619.441.9780
harmoni@villatoscana.cc

APPLICATION TO RENT

Tenant
 Guarantor

(All sections must be completed)

Individual applications required from each occupant 18 years of age or older.

Last Name		First Name		Middle Name		Social Security Number or ITIN	
Other names used in the last 10 years				Work phone number ()		Home phone number ()	
Date of birth		E-mail address				Mobile/Cell phone number ()	
Photo ID/Type		Number		Issuing government		Exp. date	
Other ID							
1. Present address		City		State		Zip	
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out						Current rent \$ /Month	
2. Previous address		City		State		Zip	
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out							
3. Next previous address		City		State		Zip	
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out							
Proposed Occupants: List all in addition to yourself	Name			Name			
	Name			Name			
	Name			Name			
Do you have pets?	Describe			Do you have a waterbed?	Describe		
How did you hear about this rental?							
A. Current Employer Name				Job Title or Position		Dates of Employment	
Employer address				Employer/Human Resources phone number ()			
City, State, Zip				Name of your supervisor/human resources manager			
Current gross income				Check one			
\$				Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year			
B. Prior Employer Name				Job Title or Position		Dates of Employment	
Employer address				Employer/Human Resources phone number ()			
City, State, Zip				Name of your supervisor/human resources manager			
Other income source _____ Amount \$ _____ Frequency _____							
Other income source _____ Amount \$ _____ Frequency _____							



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Name of your bank	Branch or address	Account Number

Please list ALL of your financial obligations below.

Name of Creditor	Address	Phone Number	Monthly Pymt. Amt.
		()	
		()	
		()	
		()	
		()	
		()	

In case of emergency, notify:	Address: Street, City, State, Zip	Relationship	Phone
1.			
2.			

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

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Other motor vehicles: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____

Have you ever been convicted of selling, distributing or manufacturing illegal drugs? _____

Applicant represents that all the above statements are true and correct, authorizes verification of the above items and agrees to furnish additional credit references upon request. Applicant authorizes the Owner/Agent 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 Owner/ Agent to disclose tenancy information to previous or subsequent Owners/Agents.

Owner/Agent will require a payment of \$ _____, which is to be used to screen Applicant.

The amount charged is itemized as follows:

1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports \$ _____
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) \$ _____
3. Total fee charged \$ _____

The undersigned is applying to rent the premises designated as:

Apt. No. _____ Located at _____

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

Date

Applicant (signature required)



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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.

