

**C. L. DAVIES, INCORPORATED**  
**1260 Lake Blvd. Ste. 246**  
**DAVIS, CA 95616**  
**Phone: 530-750-3540**  
**Email: [CLDAVIES@CLDAVIESPROPERTIES.COM](mailto:CLDAVIES@CLDAVIESPROPERTIES.COM)**  
**ID#01093016**

Submission and Screening of attached **Rental Application**

Attached you will find the rental application for the purpose of applying to rent one of the rental properties managed by CL Davies, Inc. Landlord's written screening criteria are provided in the statement with this rental application. All properties are available to be seen by appointment only. Please call 530-750-3540 to schedule a viewing. Our properties are currently occupied with tenants. We ask that you PLEASE DO NOT DISTURB our current tenants.

CL Davies, Inc., has a "First Qualified, First Approved" policy. Completed Applications are considered in the order received. The first applicant to meet the qualifying criteria will be made an offer to rent. Applicants are not charged a screening fee unless or until their application is actually considered.

**TOTAL APPLICATION PROCESSING FEE SUBJECT TO RENTAL/CREDIT HISTORY REVIEW IS \$30.00 FOR AN INDIVIDUAL APPLICATION AND \$40.00 FOR A JOINT (legally married) APPLICATION.**

**Payment is used for screening of applicant. The application processing fee is charged as follows:**

**Cost to obtain, process and verify screening information and other screening reports by staff (may include credit report).** Processing fees will not be refunded to applicants who are denied because of failure to meet the written qualifying requirements.

Once you have viewed a property and want to apply to rent the property, you must complete the attached rental application and submit with your State or Federally issued photo ID. In addition, we will need documentation for Proof of Income. We will need 3 of your most recent employment paystubs for employment income, 2 years of tax returns for the self employed income, 2 most recent SSI or SDI benefits statements, written statements related to government issued financial assistance, or statements of financial aid from academic institutions for proof of income other than employment income.

At a minimum, your monthly income must be 2.5 x the rental amount. You must have a satisfactory rental history, no evictions, no complaints or history of property damage.

Each applicant, 18 years age or older, must submit an individual rental application. ALL required documentation must be submitted with your application. All applications that contain all supporting documentation will be the first processed and considered. This does not guarantee your approval to rent the property. If your application is submitted without all supporting documentation, your application will not be considered. We may receive more than one application for a property.

**APPLICATION TO RENT OR LEASE**

**CL Davies, Inc.**

**The undersigned hereby makes an application to rent the property located at:  
(If applying for more than one property, list in order of preference)**

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**Property address(es)**

**Applicant name:** \_\_\_\_\_

**Spouse name:** \_\_\_\_\_

**Phone (CELL):** \_\_\_\_\_ **(home):** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ **Spouse SSN** \_\_\_\_\_

**Names of other occupants:** \_\_\_\_\_

**Pets? Name, age and breed:** \_\_\_\_\_

**Do you or (if family application) anyone in your family smoke:** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

**RENTAL HISTORY**

**Current address:** \_\_\_\_\_ **zip code:** \_\_\_\_\_

**Start:** \_\_\_\_\_ **End:** \_\_\_\_\_ **Reason for leaving?:** \_\_\_\_\_

**Name of owner or manager:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Previous address:** \_\_\_\_\_ **zip code:** \_\_\_\_\_

**Start:** \_\_\_\_\_ **End:** \_\_\_\_\_ **Reason for leaving?:** \_\_\_\_\_

**Owner or manager:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Previous address:** \_\_\_\_\_ **zip code:** \_\_\_\_\_

**Start:** \_\_\_\_\_ **End:** \_\_\_\_\_ **Reason for leaving?:** \_\_\_\_\_

**Owner or manager:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Have you ever been evicted or refused to pay rent?:** \_\_\_\_\_

**EMPLOYMENT/INCOME INFORMATION**

**Your employment status:**

**Full time:** \_\_\_\_\_ **Part time:** \_\_\_\_\_ **Retired:** \_\_\_\_\_ **Unemployed:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address of employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Date employed:** \_\_\_\_\_ **Monthly salary:** \_\_\_\_\_

**Spouse's employment status:**

**Full time:** \_\_\_\_\_ **Part time:** \_\_\_\_\_ **Retired:** \_\_\_\_\_ **Unemployed:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address of employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Date employed:** \_\_\_\_\_ **Monthly salary:** \_\_\_\_\_

**Other income (parents, child support, alimony, financial aid, etc.):**

**Monthly income:** \_\_\_\_\_ **Source:** \_\_\_\_\_

**EMERGENCY INFORMATION**

Name of person to contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Nearest relative: \_\_\_\_\_ Phone: \_\_\_\_\_

**AUTOMOBILE INFORMATION**

Make/Model: \_\_\_\_\_ Year: \_\_\_\_\_

Color: \_\_\_\_\_ License No.: \_\_\_\_\_

I certify that all the information given above is true and correct and understand that my lease may be terminated if I have made any false or incomplete material statements on this application. I authorize the verification of the information provided in this application from my credit sources, credit bureaus, current and previous landlords and employers. Tenant Screening Center, In. 6570 Oakmont Drive, suite B, Santa Rosa, CA 95409, phone: 1-800-523-2382, www.tsci.com  
This permission will survive the expiration of my tenancy. I understand that by paying all or part of the security deposit on this property, I am making a firm commitment to lease this property upon approval of my application. If I should decide not to rent the property following any payment of security deposit, I may forfeit all or part of the security deposit.

Application signature: \_\_\_\_\_ Date: \_\_\_\_\_

Application signature: \_\_\_\_\_ Date: \_\_\_\_\_

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# GUARANTEE OF RENTAL AGREEMENT

TO: CL DAVIES, INCORPORATED  
P. O. BOX 451  
DAVIS, CA 95617  
PHONE: (530) 750 - 3540

WE/I, \_\_\_\_\_, THE PARENT(S) OR GUARDIAN(S)  
OF \_\_\_\_\_, HEREBY ACCEPT FULL  
FINANCIAL RESPONSIBILITY FOR HIS/HER PORTION OF THE LEASE AT THE PROPERTY LOCATED AT  
\_\_\_\_\_.

WE/I UNDERSTAND AND AGREE THAT WE/I GUARANTEE TO FULLFILL ALL FINANCIAL OBLIGATIONS  
RELATED TO THIS LEASE INCLUDING PAYMENT OF RENT AND/OR PAYMENT FOR DAMAGES. IN THE EVENT  
OF BREACH OF ANY TERMS OF THE RENTAL AGREEMENT BY RESIDENT, GUARANTOR SHALL BE LIABLE  
FOR ANY DAMAGES, FINANCIAL OR PHYSICAL, CAUSED BY RESIDENT.

AS FINANACIAL GUARANTOR FOR OUR CHILD'S PORTION OF THIS LEASE, WE/I UNDERSTAND WE/I SHALL  
REMAIN OBLIGATED BY THE TERMS OF THIS GUARANTEE FOR THE ENTIRE PERIOD OF THE TENANCY AS  
PROVIDED IN THE RENTAL CONTRACT AND FOR ANY EXTENSIONS GRANTED PURSUANT THERETO.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
PRINTED: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_  
HOME/CELL NUMBER  
\_\_\_\_\_

## EMPLOYMENT/INCOME

PRESENT  
EMPLOYER: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

POSITION: \_\_\_\_\_ SALARY PER MONTH: \_\_\_\_\_ HIRE DATE: \_\_\_\_\_

PHONE: \_\_\_\_\_ SUPERVISOR NAME: \_\_\_\_\_

ARE YOU SELF EMPLOYED? YES \_\_\_ NO \_\_\_ IF YES, YOU MUST PROVIDE A COPY OF LAST INCOME TAX RETURN

TYPE OF BUSINESS: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

I certify that all the information given above is true and correct and understand that my lease may be terminated  
if I have made any false or incomplete material statements on this application. I authorize the verification of the  
information provided in this application from my credit sources, credit bureaus, and employers.

Application signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_