	CALIFORNIA ASSOCIATION OF REALTORS®	PLICATION TO LEASE OR RENT/SCREENING FEE (C.A.R. Form LRA, Revised 12/22)
	I. APP	PLICATION TO RENT
	TION TO BE COMPLETED BY APPLICANT. CUPANT 18 YEARS OF AGE OR OVER, OR J	A SEPARATE APPLICATION TO LEASE OR RENT IS REQUIRED FOR AN EMANCIPATED MINOR.
☐ guai Total n 2. PERSC A. FL	rantor/co-signor. umber of applicants DNAL INFORMATION JLL NAME OF APPLICANT	or Rent as a (check one) \Box tenant, \Box tenant with co-tenant(s) or
		otaining credit reports. Age discrimination is prohibited by law.)
D. Ph E. En	request from Rental Property Owner, Author one number: Home nail:	StateExpires urity Number/Tax Identification Numbers. Such number shall be provided upon ized Broker or Agent, or Property Manager ("Housing Provider"). WorkOther elationship to applicant
	t(a) (Other than eaching or companies animal	(a) (number and type)
H. Au	to: Make Model her vehicle(s):	ls) (number and type) Year License No State Color
l In	case of emergency, person to notify (other tha	Phone Phone
J. Do lf y K. Ha lf y L. Ha se lf y (Ai so	tes applicant of any proposed occupant plant es, type as applicant been a party to an unlawful detain es, explain as applicant or any proposed occupant ever be ven years? yes, explain fter completing a credit review, Housing Provid	er action or filed bankruptcy within the last seven years?
	ENCE HISTORY	
City/Sta From _ Name o Housin Do you	t addressto of Housing Provider g Provider's phone own this property?	City/State/Zip Fromto Name of Housing Provider Housing Provider's phone Did you own this property? DYes □ No Reason for leaving this address
Curren Curren From _ Superv Superv Employ	to isor isor's phone /ment gross income \$ per	Previous employer address From
© 2022, Califor	ncome Info nia Association of REALTORS®, Inc. SED 12/22 (PAGE 1 OF 3)	Other income info

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Pro	operty Address:		Date:
5.	CREDIT INFORMATION A. CREDITORS		
	Name of Creditor:		Account
	Monthly Payment: \$		Balance Due: \$
	Name of Creditor:		Account
	Monthly Payment: \$		Balance Due: \$
	Name of Creditor:		Account
	Monthly Payment: \$		Balance Due: \$
	Name of Creditor:		Account
	Monthly Payment: \$		Balance Due: \$
	B. BANKING		
	Name of Bank/Branch:		Account No
	Type of Account:		Account Balance: \$
	Name of Bank/Branch:		Account No
	Type of Account:		Account Balance: \$
6.	PERSONAL REFERENCES		
	Name	Address	
	Phone	Length of acquaintance	Occupation
	Name	Address	
	Phone	Length of acquaintance	Occupation
7.	NEAREST RELATIVE(S)		
	Name		
	Phone	_ Relationship	
	Name	Address	
	Phone	_Relationship	

Applicant understands and agrees that: (i) this is an application to rent only and does not guarantee that applicant will be offered the 8. Premises; (ii) Housing Provider may receive more than one application for the Premises and, (iii) Applicant will provide a copy of applicant's driver's license or other acceptable identification upon request.

Applicant represents the above information to be true and complete, and hereby authorizes Housing Provider to: (i) verify the information provided; and (ii) obtain a credit report on applicant and (iii) obtain an "Investigative Consumer Report" ("ICR") on and about applicant. An ICR may include, but not be limited to, criminal background checks, reports on unlawful detainers, bad checks, fraud warnings, and employment and tenant history. By signing below, you also acknowledge receipt of the attached NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW (C.A.R. form BIRN).

• Delease check this box if you would like to receive, at no charge, a copy of an ICR or consumer credit report if one is obtained by the Housing Provider whenever you have a right to receive such a copy under California law.

Applicant further authorizes Housing Provider to disclose information to prior, current, or subsequent owners and/or agents with 9. whom applicant has had, or intends to have, a rental relationship.

If application is not fully completed, or if section II, 2 is applicable and the application is received without the full screening fee: (i) the application will not be processed, and (ii) the application and any portion of the screening fee paid will be returned.

Applicant Signature		Date _	
Return your completed application and any application	able fee not already paid to:		
Address	City	State	Zip
		·	
A REVISED 12/22 (PAGE 2 OF 3)			EQUAL HOUSING OPPORTUNITY

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II. PROPERTY INFORMATION AND SCREENING FEE

THIS SECTION TO BE COMPLETED BY HOUSING PROVIDER (applicant may fill in the "Premises" in paragraph 1A below):

1. PROPERTY INFORMATION

A. Applicant submits this application to lease or rent for the Premises located at ____

____ ("Premises") or 🗆 any

- prospective locations which may fit Applicant's rental criteria.
- B. Rental Amount: \$_____ Rent per month.
- C. Proposed move-in date:

2. SCREENING FEE

- A. D Applicant will provide screening information and fee directly to Housing Provider's authorized screening service at:
- B. □ Applicant shall pay a nonrefundable screening fee of \$_____ per applicant, directly to Housing Provider, applied as follows: (Civil Code Section 1950.6 sets the maximum screening fee that can be charged, as adjusted annually by the Consumer Price Index. As an example, the maximum screening fee in 2020 was \$52.46 per applicant, according to the DRE publication titled California Tenants. A CPI inflation calculator is available on the Bureau of Labor Statistics website, www.bls.gov.)
 - for credit reports prepared by _____
 - \$ ______ (other out-of-pocket expenses); and
 - \$ ______ for processing.
- C. If 2B is selected, and the application is received without the full screening fee: (i) Housing Provider will notify Applicant, (ii) the application will not be processed, and (ii) the application and any portion of the screening fee paid will be returned.
- **D.**
 □ Applicant shall provide Social Security Number/Tax Identification Number to Housing Provider.

The undersigned has read the foregoing section regarding the screening fee and acknowledges receipt of a completed copy.

Applicant Signature	

Date

Housing Provider acknowledges receipt of this entire Application to Lease or Rent/Screening Fee.

Ву:	DRE	Lic.#	Date

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