Ocean Center Apartments

APPLICATION FOR RENTAL

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

The undersigned hereby makes application to rent an Apartment at Ocean Center Apartments.

APPLICANT INFO	RMATION	santalu kojaka	Sylp Faville		one see	
LAST NAME	FIRST NAME	M.I.		SSN		DRIVER'S LICENSE #
BIRTH DATE	PHONE #1	ALTERNAT	E PHONE	EMAIL		
CURRENT ADDR	ESS (Conventional P	roperties: minimu	m 2 vears)		Maries (Care	
STREET ADDRESS		CITY		STATE	1	ZIP
DATE IN	DATE OUT	LANDLORE	LANDLORD NAME			ANDLORD PHONE
LANDLORD STREET ADDRESS		LANDLORE	LORD CITY LANDLOR		ATE I	ANDLORD ZIP CODE
Current Residence	e: Rent	Own		Other:		
MONTHLY RENT	1					
NAME OF THE OWNER, OWNER, OWNER, OWNER, OWNER, OWNER,	INCOME INFORMAT					
OCCUPATION		EMPLOYER	EMPLOYER/COMPANY			SALARY
SUPERVISOR		SUPERVISO	OR PHONE	START DATE		END DATE
EMPLOYER ADDRESS		CITY		STATE		ZIP
Has applicant eve	er filed bankruptcy?					
Filed?	Date:	County:		State:	15	Status:
□ No □ Yes						
Have you ever willfully No Yes	refused to pay rent when	due?		1:		
Have you ever been ev	icted from a tenancy or lef	t owing money?				
Have you ever been co	nvicted of a crime?					
□ No □ Yes						
EMERGENCY CO	AMERICAN AND AND AND AND AND AND AND AND AND A	Par of tree 11 to 12 con			Secure has	
NAME	ADDRESS	ADDRESS		PHONE		RELATIONSHIP
NAME	ADDRESS	ADDRESS			F	ELATIONSHIP
HOW DID YOU FIF	RST LEARN OF THIS	COMMUNITY?				
VEHICLE INFORM		and the same		PAN HOUSE POR TO		STELLING STREET
MAKE	MODEL	YEAR	COLOR	PLATI	E #	STATE
Do you own any re	ecreational vehicles?					1
□ No □ Yes	Boats:		Campers:		Other:	
	authorized at this ti	mo				



Ocean Center Apartments

Has your pet(s) ever been cited by a government agency for any animal violation?		
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Subject to approval by the Agent for the Owner, the undersigned prospective resident agrees to pay an apartment reservation deposit and a non-refundable application fee for the purpose of reserving an apartment. Monthly rent is due on the 1st of each month. Upon execution of the lease agreement (which is available upon request) this reservation deposit will be applied to the security deposit and additional fees as listed on the Reservation Deposit Agreement will be due. It is understood that any changes hereto must be in writing and signed by all parties. If your application is cancelled or denied, any refund may take up to 30 days by mail.

FOR OFFICE USE ONLY				
\$ Amount Received				
Check Money Order Cashier's Check Document Number				
Agent Initials				

Apt #:	Reservation Deposit:	Non-Refundable Application Fee:		
Lease Term:	Lease Start Date:	Rental Rate:		
Applicant Signature		Date		

Please email the completed application to leasing office@oceancenterapartments.com and call 562-432-1364 to confirm receipt.

Thank you!

