

First Choice Housing
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Los Angeles, CA 90007
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Property Management Associates
5120 West Goldeaf Circle, Suite 300
Los Angeles, CA 90056
Tel: (323) 295-2000 • Fax: (323) 295-9200

Property Management Associates Application for Rent and Rental Deposit

Full Name of Applicant _____
(First) (Middle) (Last)

Date of Birth _____

Phone Number _____

Email Address _____

Social Security # _____ Passport # (if not a US Citizen) _____

Driver's License # _____ State _____

Permanent Address _____

City, State, & Zip _____

Present Address _____

Present City, State, & Zip _____

Length of time at Present Address _____

Reason for leaving _____

Do you have any pets? Yes NO If so what kind _____

Are you a full time Student? Yes No If no, please fill out Employer Info below:

Present Employer _____	Length of time with Present Employer _____
Address _____	City _____ State _____ Zip _____
Phone # _____	Position _____ Gross Income \$ _____ per _____
Other Income \$ _____ per _____	Source _____
If present employer is less than one year, list immediate prior employment information _____	

Name(s) of all other occupants and relationship to applicant: _____

In Case of an Emergency, notify _____ Relationship _____

Email address _____ Phone (____) _____

Bank Account Information

Bank	City	State	Type of Account

By signing below, I, hereby agree that all the above information is true, correct, and complete, and that the landlord has the authorization to verify all the information stated above through credit agency and/or other individuals. I further understand that the landlord has the right to evict me and/or reject my application based on any misinformation.

Applicant _____

Date _____