

**STAR-CROSSED PROPERTIES RENTAL APPLICATION** Required move in date \_\_\_\_\_

P.O. Box 2275 Davis, CA 95617 (530) 757-7368 (530) 750-3788 fax

<http://Starcrossedinc.com> Tcross@starcrossedinc.com

Every person over the age of 18 years of age must complete Rental Application & Pay Application Fee

**Circle one:** Viking Apts Cascade Apts Sherwood or Forest Arms Lone Oak Apts  
Fairway Apts 3713 Morse Ave. 416, 416 1/2, 418, 420 J Street College Street Apts

Name \_\_\_\_\_ Apt. Requested # \_\_\_\_\_ Type of Apt. \_\_\_\_\_

Soc. Sec. # \_\_\_\_\_ Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Pets? \_\_\_\_\_ (describe) \_\_\_\_\_

Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Expire Date \_\_\_\_\_

**Present Address**

Month/Year moved in \_\_\_\_\_ to \_\_\_\_\_ Rent \$ \_\_\_\_\_ per month.

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Landlord name \_\_\_\_\_ Landlord Phone # (\_\_\_\_) \_\_\_\_\_

Reason for moving ? \_\_\_\_\_

**Previous Addresses**

Month/Year moved in \_\_\_\_\_ to \_\_\_\_\_ Rent \$ \_\_\_\_\_ per month.

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Landlord name \_\_\_\_\_ Landlord Phone # (\_\_\_\_) \_\_\_\_\_

Reason for moving ? \_\_\_\_\_

**Present Occupation**

Month/Year hired \_\_\_\_\_ to \_\_\_\_\_ Employer \_\_\_\_\_ Salary \$ \_\_\_\_\_ per month.

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Position \_\_\_\_\_ Supervisor name \_\_\_\_\_ Emp. Phone # (\_\_\_\_) \_\_\_\_\_

**Previous Occupation**

Month/Year hired \_\_\_\_\_ to \_\_\_\_\_ Employer \_\_\_\_\_ Salary \$ \_\_\_\_\_ per month.

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Position \_\_\_\_\_ Supervisor name \_\_\_\_\_ Emp. Phone # (\_\_\_\_) \_\_\_\_\_

**Vehicles**

Auto make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Motorcycle/Auto make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

**Personal Information**

Personal Reference \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I declare that the statements above are true and correct, and I hereby authorize verification of references given and a credit check. I understand submitting an incomplete rental application may be grounds for not leasing.

Date \_\_\_\_\_ Signed \_\_\_\_\_