



RENTAL APPLICATION FOR:

Valley Fair Realty Corp.

508 Forbes Ave. • Yuba City, CA. 95991

Ph: (530) 673-3916 • Fax: (530) 673-3946 • E-Mail: vfr@vfrcorp.com



Please include "Proof of Income" and a "Processing Fee of: \$ 20.00.

NOTICE TO APPLICANT: Application information must be complete. If not complete, it will be returned to the applicant. It is your responsibility to contact this office to advise us of any changes in your circumstances: address, phone, income, number of household members, etc.	OFFICE USE ONLY
	DATE REC'D _____
	TIME _____
	B/R SIZE _____

I. PERSONAL INFORMATION - Please list ALL people who will live with you				
FULL NAME	RELATIONSHIP TO APPLICANT	BIRTHDATE	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER
1.	SELF			
2.				
3.				
4.				
5.				
6.				

II. HOUSING HISTORY - All notices and calls will go to this address and phone number

CURRENT ADDRESS _____ CITY/STATE/ZIP _____

MAILING ADDRESS _____ CITY/STATE/ZIP _____

HOME PHONE _____ MESSAGE PHONE _____

OCCUPIED FROM _____ TO _____ AMOUNT OF RENT PAID \$ _____

REASON FOR LEAVING _____

CURRENT LANDLORD'S NAME _____ PHONE _____

COMPLETE ADDRESS _____

PREVIOUS ADDRESS _____ CITY/STATE/ZIP _____

OCCUPIED FROM _____ TO _____ AMOUNT OF RENT PAID \$ _____

REASON FOR LEAVING _____

CURRENT LANDLORD'S NAME _____ PHONE _____

COMPLETE ADDRESS _____

PREVIOUS ADDRESS _____ CITY/STATE/ZIP _____

OCCUPIED FROM _____ TO _____ AMOUNT OF RENT PAID \$ _____

REASON FOR LEAVING _____

CURRENT LANDLORD'S NAME _____ PHONE _____

COMPLETE ADDRESS _____

- NOTE* - If you answer yes to any of the following questions, a through h, please explain on a separate sheet of paper and attach to this application.
- a. Have you had additional addresses not listed above, or have you ever applied for housing under a different name? _____
 - b. Are you related to any of the above landlords? _____ If yes, please state your relationship after the landlord's name above. _____
 - c. Do you anticipate a change in your household size for any reason within the next 12 months? _____
 - d. Would you or any member of your household benefit from the design features of a handicap accessible unit or require special accommodation? _____
 - e. Are you being, or have you ever been evicted? _____
 - f. Have you or any member of your household been convicted of a felony? _____
 - g. Are you, or any member of your household engaged in the current (current meaning within the past 18 months) illegal use of a controlled substance? _____
 - h. Do you have pets? _____ If yes, how many and what kind? _____

III. PERSON TO NOTIFY IN CASE OF EMERGENCY

Name _____ Relationship _____ Phone # _____ Address _____ City/State/Zip _____

