



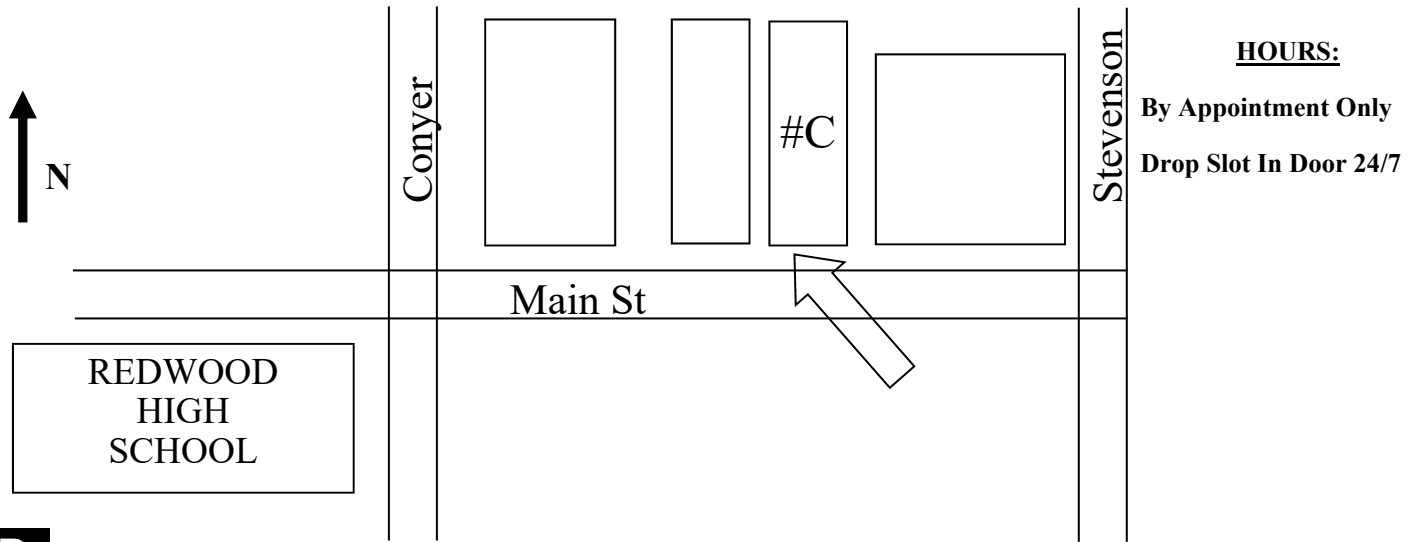
808 W Main St, Ste C
 Visalia, CA 93291
 Office: (559)786-2850
 Fax: (559)750-4164
 Email: info@blueskyrents.com

Check list for turning in this application:

1. Please review your application before submitting. There are 3 pages including this one.
2. Fill out COMPLETELY with all information that pertains to you.
3. Submit \$15 CASH per adult applicant (non-refundable).
OR click the "Buy Now" button on the application page at www.blueskyrents.com and make an electronic payment (extra \$1 per applicant to cover transaction fees).
4. Fax, email, mail, or drop-off the application. Use the information on this page for any addresses, phone numbers, etc., you may need.

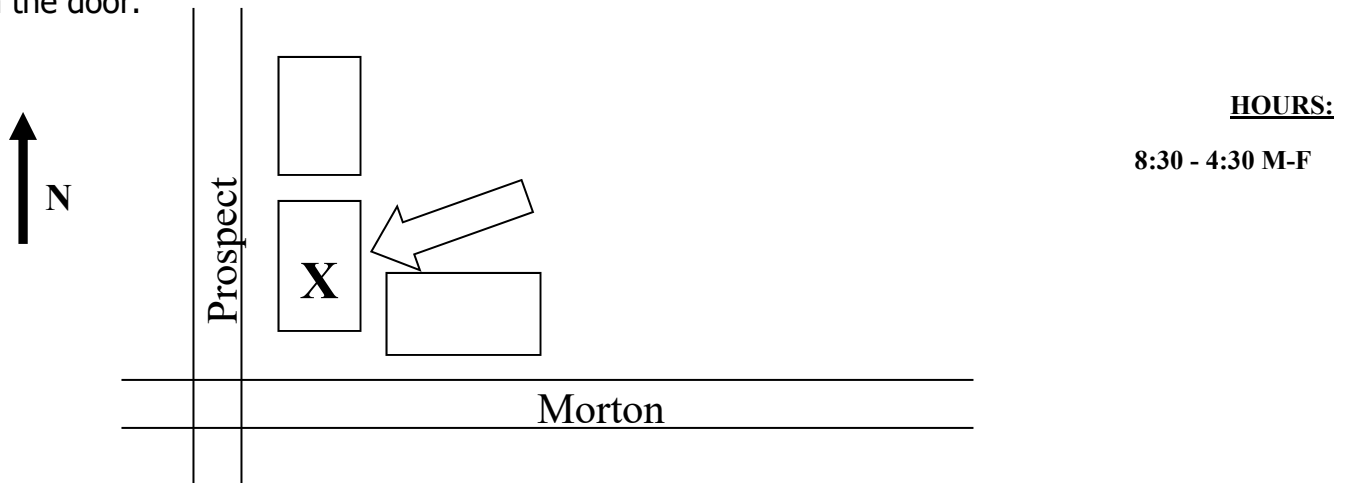
There are two locations to drop-off the application:

1. **Visalia - 808 W Main St, #C, Visalia.** This is also the mailing address. Hours are by appointment only, BUT there is 24/7 access to the drop slot in the door.



OR

2. **Porterville - 444 N Prospect, #B, Porterville.** There is 24/7 access to the drop slot in the door.





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 (559)786-2850 Office
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Property applying for: _____

Expected Move-In Date: _____

- 1) Please submit **\$15 cash, non-refundable**, application review fee for each adult applicant.
- 2) Please provide a copy of a recent paystub.

Residential Lease Application**

Housing
(2 yr History)

Applicant				Co-Applicant			
Name				Name			
Social Security Number		Driver's License Number & State		Social Security Number		Driver's License Number & State	
DOB (mm/dd/yyyy)	Phone			DOB (mm/dd/yyyy)	Phone		
Email				Email			
How many intend to occupy the property? Adults ____ Kids ____ / Pets (please list):							
Present Address				Present Address			
Monthly Rent	Dates (from-to)			Monthly Rent	Dates (from-to)		
Landlord Name And Number				Landlord Name And Number			
Former Address				Former Address			
Monthly Rent	Dates (from-to)			Monthly Rent	Dates (from-to)		
Landlord Name And Number				Landlord Name And Number			
Former Address				Former Address			
Monthly Rent	Dates (from-to)			Monthly Rent	Dates (from-to)		
Landlord Name And Number				Landlord Name And Number			
Name And Address of Employer				Name And Address of Employer			
Yrs at this job				Yrs at this job			
Position	Salary	Business Phone		Position	Salary	Business Phone	
Auto Make	License Number & State	Color		Auto Make	License Number & State	Color	
Reference (Name, Relationship, Phone)				Reference (Name, Relationship, Phone)			
I acknowledge that the information provided in this application is true and correct as of the date signed. You are hereby authorized to verify my credit, employment and housing references in connection with the processing of this application. I acknowledge and agree that my credit may be verified through a consumer reporting agency.							
Applicant's Signature				Date	Co-Applicant's Signature		Date

Work

Auto

References



**Instructions for turning in this application are attached.

Blue Sky Property Management

Request for Resident Verification

We are requesting a rental reference for:

[Applicant to complete (*) items only]

NAME*: _____

ADDRESS*: _____

- Move-In Date: _____ Lease Exp. Date: _____
- Move-Out Date: _____
- Has resident given proper notice of intent to vacate? _____
- Monthly Rent: _____
- Have any legal notices been served for non-payment? _____
- If yes, how many times? _____
- Have any checks been returned for non-sufficient funds? _____
- If yes, how many? _____
- Are there any problems or complaints on file? _____
- Is there any property damage caused by the resident or his/her guests? _____
- If yes, please explain: _____
- Would you rent to this resident again? _____

Reference completed by: _____ Date: _____

Thank you for your assistance. Please **FAX** this information to **559-750-4164** as soon as possible. If you are not able to complete this reference or have questions, please contact us at 559-786-2850.

By signing this document, you are authorizing Blue Sky Property Management to obtain your credit report and to check other references and information as is necessary to process your rental application.

Applicant's Signature*

Date*

Co-Applicant's Signature*

Date*

Print Name*

Print Name*