

COCHRANE PROPERTY MANAGEMENT INC

RENTAL APPLICATION

Please mail application to:
PO Box 4370, Santa Barbara, CA 93140
 (805) 965-2887 Fax (805) 966-6468

Fee: \$25 per applicant over age 18 – money order only
Make money order to Cochrane Property Management Inc.
An application to rent is required for any occupant 18 years of age or over.

PROPERTY ADDRESS: _____
PLEASE INCLUDE COPIES OF DRIVERS LICENSE, SOCIAL SECURITY CARD, ITIN Card, and PROOF OF INCOME.

APPLICANT NAME		CO-APPLICANT NAME	
Phone	Date of Birth	Phone	Date of Birth
Present Address		Present Address	
City/State/Zip		City/State/Zip	
Current Landlord/Manager		Current Landlord/Manager	
Landlord/Manager's Phone #		Landlord/Manager's Phone #	
Reason for leaving and how long at present address?		Reason for leaving and how long at present address?	
Email Address		Email Address	

Names of all other occupants who will reside in this unit, and their relationship to the applicant above: _____

List up to two prior addresses within the last seven years, **the Landlord's name, and phone #.**

1. _____
 2. _____

Do you have pets? Yes No How many? Type/Breed _____
Applicant Soc. Sec. # _____ - _____ - _____ Driver's Lic.# _____ State _____ Exp. date _____

Present Employer: _____ How long at this job? _____

Employer's Address: _____ Phone _____

Type of work/position/title _____ Monthly Gross Income \$ _____

Other Income Amt. \$ _____ per _____ Source _____

Do you own a car? Yes No Make: _____ Model _____ Year _____ License # _____ State _____

List last three years of employment information, if present employer is less than one year: _____

Co- Applicant Soc. Sec. # _____ - _____ - _____ Driver's Lic.# _____ State _____ Exp. date _____

Present Employer: _____ How long at this job? _____

Employer's Address: _____ Phone _____

Type of work/position/title _____ Monthly Gross Income \$ _____

Other Income Amt. \$ _____ per _____ Source _____

Do you own a car? Yes No Make: _____ Model _____ Year _____ License # _____ State _____

List last three years of employment information, if present employer is less than one year: _____

Has either applicant ever been convicted of selling, distributing or manufacturing illegal drugs? _____

In case of emergency, notify: _____ Phone _____

Has either applicant had an unlawful detainer action, been convicted of a felony or filed bankruptcy within the last 7 years? Yes No If yes, when? _____

Please explain: _____

CREDIT INFORMATION

Appl/Co-Applicant	Name of Creditor	Account Number	Monthly Pmt	Balance Owed
Appl/Co-Applicant	Name of Bank	Address/Branch	Account No.	Type of Account

Applicant(s) represent(s) the above information to be true, correct and complete and hereby authorize(s) verification of the information provided, including obtaining credit report(s). The cost of the application fee is non-refundable, even if the application is declined. It can never be applied to a security deposit or rent at any time. All Applicants understand that the landlord may terminate any rental agreement entered into for any misrepresentation made above. **Please make a copy for your receipt.**

Applicant Signature/Date: _____ Co-Applicant Signature/Date: _____