



*Villa East &
Palo Verde*
A P A R T M E N T S

275 E. Shasta Avenue Chico, CA 95973
P:(530) 343-3957 F:(530) 343-2589
Email: chicovillaeast@bacorealty.com
Website: www.bacorealtycorp.com

****Pre-Qualifying Materials Needed When Applications are Submitted****

We are excited that you have chosen Villa East and Palo Verde Apartments as your next home! In order to complete your application in its entirety, the following items need to be turned in when you submit your application:

1. Copy of driver's license and/or identification card
2. Most recent bank statement for checking and/or savings accounts
3. Proof of Income (Ex: Current paystub, social security statement, etc.)
4. Credit Check fee in the amount of \$30 per adult applicant. (Check or money order)

Thank you again for your interest in Villa East and Palo Verde Apartments! If you have any questions, please feel free to call us. Our office is here to serve you!

We are excited to announce that we are a Smoke Free Property!



Villa East and Palo Verde Apartments

SELECTION CRITERIA

We want to thank you for considering Villa East & Palo Verde as your next home. We are very proud of our community and believe you will be too. Our required standards for qualifying are listed below. You will be pleased to know that all residents/applicants have been screened with the same quality care. There is a non-refundable credit history/application fee in the amount of \$ 30.00 per adult applicant. This form and each application must be filled in completely and signed in order to complete this process.

The objectives of this tenant criteria:

- outline the areas used to determine eligibility to occupy housing owned or managed by BACO Realty Corporation;
- set forth guidelines for applying the criteria in a nondiscriminatory way so as to comply with all applicable fair housing laws, and to ensure decisions affecting admission to and continued occupancy of residence in the community are made without regard to race, color, religion, sex, national origin, familial or handicap status and any legislation protecting the individual rights of residents, applicants or staff which may subsequently be enacted.
- lawfully deny admission to anyone whose presence threatens the health, safety or welfare or persons or community property or that threatens to disrupt the peaceful enjoyment of the property by other members of the community;
- ensure the financial stability of the community and the owners;
- promote safe and sanitary housing.

An applicant may be rejected if they fail to meet any of the following criteria:

1. Gross Income must be at least 3 times the monthly rent.
2. Negative rental history or mortgage history.
3. Lack of verifiable employment history with current employer.
4. Negative Credit history.
5. Evictions from prior housing.
6. Occupancy guidelines- 2 persons per bedroom plus 1.
7. Negative criminal history. Criminal convictions or arrests that result in an adjudication against the applicant other than a finding of not guilty that involve: fire, firearms, illegal drugs, theft, destruction of property, sex offense, violence to another person, any crime involving a minor, or any criminal offense that may threaten the health, safety or right to peaceful enjoyment of the premises by other residents.
8. Misrepresentation on the applicant's applications, including failure to disclose previous rental evictions or complete criminal history.
9. Lack of Renter's Insurance at move-in.
10. Residents shall pay all utility charges.

We look forward to serving you!

Applicant's Signature _____ Date _____

_____ Date _____



RENTAL APPLICATION

FOR OFFICE USE ONLY							
COMMUNITY		APP FEE \$ \$30.00		MONTHLY RENT \$		APPLICATION TAKEN BY	
APT. NUMBER		APT. TYPE		CONCESSION (IF ANY) \$500 Sec Dep		LENGTH OF LEASE TERM 1 Year or Month to Month	
APPLICANT						DATE OF BIRTH	
SOCIAL SECURITY NUMBER			DRIVER'S LICENSE NUMBER			STATE	
EMAIL ADDRESS				PHONE:		WORK:	
CURRENT ADDRESS			LANDLORD NAME	PHONE NO.	LENGTH OF RESIDENCY	RENT/MORT. \$	
PREVIOUS ADDRESS		STREET		CITY, STATE, ZIP		LANDLORD PHONE:	
LANDLORD/ MORTGAGE		NAME ADDRESS			LENGTH OF RESIDENCY		
REFERRED TO US BY:		PETS/ OWNED TYPE LBS		TOTAL NUMBER OF PERSONS TO OCCUPY APARTMENT		DATE APT. NEEDED	
DO YOU OR ANY HOUSEHOLD MEMBER REQUIRE SPECIAL HOUSING NEEDS? <input type="checkbox"/> YES <input type="checkbox"/> NO							
IF YES, EXPLAIN							
SPOUSE							
NAME			PHONE		DATE OF BIRTH		
SOCIAL SECURITY NUMBER			DRIVER'S LICENSE NUMBER			STATE	
PERSONS OTHER THAN APPLICANTS TO OCCUPY APARTMENT							
NAME				RELATIONSHIP			
EMPLOYMENT INFORMATION							
APPLICANT				SPOUSE			
EMPLOYER		POSITION		EMPLOYER		POSITION	
ADDRESS		PHONE NO.		ADDRESS		PHONE NO.	
MONTHLY INCOME	PERIOD OF EMPLOYMENT	SUPERVISOR		MONTHLY INCOME	PERIOD OF EMPLOYMENT	SUPERVISOR	
OTHER SOURCES OF INCOME		CURRENT ANNUAL INCOME		OTHER SOURCES OF INCOME		CURRENT ANNUAL INCOME	
PREVIOUS EMPLOYER		POSITION		PREVIOUS EMPLOYER		POSITION	
ADDRESS		PHONE NO. ()		ADDRESS		PHONE NO. ()	
PERIOD OF EMPLOYMENT		SUPERVISOR		PERIOD OF EMPLOYMENT		SUPERVISOR	

RENTAL APPLICATION

FINANCIAL INFORMATION			
BANK REFERENCE	SAVINGS ACCOUNT(S)	ACCOUNT NUMBER	
	CHECKING ACCOUNT(S)	ACCOUNT NUMBER	
AUTO LOANS	FINANCED WITH	ACCOUNT NUMBER	
	FINANCED WITH	ACCOUNT NUMBER	
CHARGE ACCOUNTS	NAME		
	NAME		
AUTOS OWNED	MAKE & YEAR	LICENSE NUMBER	
	MAKE & YEAR	LICENSE NUMBER	
EMERGENCY CONTACT (1)		RELATIONSHIP	COMPLETE ADDRESS
			PHONE NO.
EMERGENCY CONTACT (2)		RELATIONSHIP	COMPLETE ADDRESS
			PHONE NO.
ADDITIONAL INFORMATION (CIRCLE YES OR NO)			
1. HAVE YOU EVER HAD ANY CREDIT PROBLEMS?		YES / NO	
2. HAVE YOU EVER HAD AN UNLAWFUL DETAINER FILED AGAINST YOU?		YES / NO	
3. HAVE YOU EVER BEEN EVICTED FOR NON PAYMENT OF RENT OR ANY OTHER REASON?		YES / NO	
4. HAVE YOU EVER FILED BANKRUPTCY?		YES / NO	
5. HAVE YOU EVER BEEN CONVICTED OF A FELONY?		YES / NO	
6. WILL YOU BE USING WATER FILLED FURNITURE IN YOUR RESIDENCE?		YES / NO	
<p><small>The undersigned represents that the above statements are true and complete and authorizes verification of information and references given. It is understood that the amount received \$_____ (the "Holding Deposit") will be returned in accordance with state law if applicant is not accepted as a resident. If accepted and subsequently the resident does not move in on the starting date (above), the amount received is hereby acknowledged as liquidated damages for non-performance and will be forfeited by the resident as compensation for holding the apartment off the market. BACO Realty Coportion / ISM Management may verify all the information provided by me for eligibility purposes and release from liability all persons or entities supplying or collecting such information. I understand that an investigation will be done and may include but is not limited to, a consumer credit report, verification of employment with salary, rental history, criminal history and I therefore consent to the investigation.</small></p>			
APPLICANT'S SIGNATURE		DATE	SPOUSE'S SIGNATURE
			DATE



EQUAL HOUSING OPPORTUNITY

