INSTRUCTIONS FOR SUBMITTING A COMPLETE APPLICATION TO RENT

TOLEDORENTAL7@GMAIL.COM

Each adult applicant must submit an application with the following requirements:

- 3 month of pay stubs
- Current government issued ID
- Credit report required
- \$40 application fee

Application fee can be paid at our office or online at:

https://sandrapropertiesinc.managebuilding.com/Resident/rental-application/new

Applications may be

Scanned and emailed to: toledorental7@gmail.com

Faxed to: 209-912-7503

Mailed or dropped off at: 519 D Street, Galt, CA 95632

All adult applicants must complete an Application to Rent, provide government issued ID, Proof of Income, no evictions, defaulted debt or collections accounts on credit report, two years of rental history with a positive landlord reference, and two times the rent in net income. Evictions are an immediate disqualification.

Tenants to pay electric, propane and trash service. Owner maintains well, septic and landscaping.

Tenants will be required to carry renter's insurance.

Lease duration 1 year.

Presented by:

Alexandra Toledo, DRE# 01780920



APPLICATION TO LEASE OR RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 12/24)

I. APPLICATION TO RENT

THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO LEASE OR RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.

1.	Applicant is completing Application to Lease or Rent guarantor/co-signor.	t as a (check one) _ tenant, _ tenant with co-tenant(s) or						
	Total number of applicants							
2.	PERSONAL INFORMATION							
	A. FULL NAME OF APPLICANT							
	B. Date of Birth (For pur	pose of obtaining credit reports. Age discrimination is prohibited by law.)						
	C. (1) Driver's license No.	pose of obtaining credit reports. Age discrimination is prohibited by law.)State Expires						
	(2) See section II, paragraph 2C for Social Security I	Number/Tax Identification Numbers, Such number shall be provided upon						
	request from Rental Property Owner, Authorized Broker or Agent, or Property Manager ("Housing Provider").							
	D. Phone number: Home W	orkOther						
	E. Email:							
	E. Email:							
	G. Pet(s) (Other than service or companion animals) (num							
	H ₄ Auto: Make Model	nber and type)State Color						
	Other vehicle(s):							
	I. In case of emergency, person to notify (other than occupants of applicant's household)							
	Address	Phone						
	J. Does applicant or any proposed occupant plan to use I	Phone Phone Yes No						
	If yes, type							
		K. Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years?						
	If yes, explain Has applicant or any proposed occupant ever been asked to move out of a residence? Yes No							
	If ves. explain							
	M. Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony within the last							
	seven years? Yes No							
	If yes, explain							
	(After completing a credit review, Housing Provider may	y consider the nature of the felony and the length of time since it occurred						
		int's ability to meet its obligations under the lease terms, and any other						
	relevant mitigating information pursuant to 2 CCR §122	266.)						
3.	RESIDENCE HISTORY							
	Current address	Previous address						
	City/State/Zip	City/State/Zip						
	From to	From to						
	Name of Housing Provider	Name of Housing Provider						
	Housing Provider's phone	Housing Provider's phone						
	Do you own this property? Yes No	Did you own this property? Yes No						
	Reason for leaving current address	Reason for leaving this address						
4.	EMPLOYMENT AND INCOME HISTORY							
	Current employer	Previous employer						
	Current employer address	Previous employer address						
	From to	From to						
	Supervisor							
	Supervisor's phone	Supervisor's phone						
	Employment gross income \$per	Employment gross income \$ per						
	Other income info	Other income info						
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		(=)						
LR.	RA REVISED 12/24 (PAGE 1 OF 3)	Applicant's Initials/						

Applicant's Initials _____/ ___/



ope	erty Address: 25919 N. Sowles Rd. , Acampo , CA 95220	Date: September 8, 2025
CI	REDIT INFORMATION	
A.	. CREDITORS	
	Name of Creditor:	Account
	Monthly Payment: \$	Balance Due: \$
	Name of Creditory	Annaniak
	Name of Creditor: Monthly Payment: \$	AccountBalance Due: \$
	Monthly Payment. \$	Balance Due: \$
	Name of Creditor:	Account
	Monthly Payment: \$	Account Balance Due: \$
	Name of Creditor: Monthly Payment: \$	Account Balance Due: \$
_	Monthly Payment: \$	Balance Due: \$
В.		
	Name of Bank/Branch:	Account No
	Type of Account:	Account Balance: \$
	Name of Bank/Branch:	Account No.
	Type of Account:	Account Balance: \$
131	ERSONAL REFERENCES	
IN 6	ameAddresshoneLength of acquaintanceOccupation	No. de la constitución de la con
M.	none Length of acquaintance Occupation	я і
IN C	ameAddresshoneLength of acquaintanceOccupation	NO.
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	ame Address	
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Na Ph Na Ph Ap the of Ap int ab	hone Address	loes not guarantee that applicant will be offered Premises and, (iii) Applicant will provide a copy authorizes Housing Provider to: (i) verify the Investigative Consumer Report" ("ICR") on an eacks, reports on unlawful detainers, bad check acknowledge receipt of the attached NOTIC
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Name of Printer Appear of	Relationship Address hone Relationship pplicant understands and agrees that: (i) this is an application to rent only and one Premises; (ii) Housing Provider may receive more than one application for the fapplicant's driver's license or other acceptable identification upon request. pplicant represents the above information to be true and complete, and herebiformation provided; (ii) obtain a credit report on applicant** and (iii) obtain an "bout applicant. An ICR may include, but not be limited to, criminal background chaud warnings, and employment and tenant history. By signing below, you also EGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LA If a screening fee is paid, the applicant will be provided a copy of the credit agys of the Housing Provider receiving the report. If a screening fee is not paid, check this box if you would like to receive credit report if one is obtained by the Housing Provider whenever you othe California law. *** If an applicant will be receiving a government rent subsidy to assist in the applicant may choose to provide lawful, verifiable, alternative evidence of reprovider rely on a credit report. The applicant shall be given a reasonable ting. Applicant will be receiving a rent subsidy pursuant to the following government.	loes not guarantee that applicant will be offered Premises and, (iii) Applicant will provide a copy authorizes Housing Provider to: (i) verify the Investigative Consumer Report" ("ICR") on an ecks, reports on unlawful detainers, bad check acknowledge receipt of the attached NOTICW (C.A.R. form BIRN). If report obtained by Housing Provider within equal to the end of the provider within the end of the provider within the end of the provider within the end of
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EQUAL HIQUISHK OPPORTUNITY Property Address: 25919 N. Sowles Rd., Acampo, CA 95220 Date: September 8, 2025

II. PROPERTY INFORMATION AND SCREENING FEE

THIS SECTION TO BE COMPLETED BY HOUSING PROVIDER (applicant may fill in the "Premises" in paragraph 1A below):

1.	PROPERTY INFORMATION A. Applicant submits this application to lease or rent for the Premises located at 25919 N. Sowles Rd., Acampo, CA 95220							
	Α.	Applicant submits this application to lease of refit for the Fremises located at 25979 N. Sowies Rd., Acampo, CA 95220 ("Premises") or any						
		prospective locat	ions which may fit Applicant's r			(, , , , , , , , , , , , , , , , , , ,		
	В.		2,100.00 Rent per mo					
	C.	Proposed move-i	n date:					
	SCI	REENING FEE: A	rental unit is available or will b	e available within a re	asonable period of time.			
	Α.	A. Applicant will provide screening information and fee directly to Housing Provider's authorized screening service at:						
OR	В.	Code § 1950.6 se	ovider, applied as follows: (Civil the Consumer Price Index. As an ornia Apartment Association.)					
		\$	for credit reports	s prepared by	Tenant Screenin	g Center, Inc.		
		\$	for		(othe	er out-of-pocket expenses); and		
		\$	for processing.			, ,,		
	c.	 Application received with the full screening fee in the amount of \$						
		 Housing Provider shall return the entire screening fee if applicant is not selected for tenancy, regardless of the reason, within seven days of selecting another applicant for tenancy or within 30 days of when the application was submitted, whichever occurs first; If Housing Provider has a written screening criteria, and that criteria is disclosed to the applicant with the application (screening criteria attached) and the first applicant meeting that criteria is approved for the tenancy, then, Housing Provider shall refund the entire screening fee within 7 days of failing to consider the application if the application is not actually considered; As an alternative to paragraph 2C(2)(i) Housing Provider may offer to apply the screening fee to another rental unit being offered by the Housing Provider. In such a case, Housing Provider may retain the screening fee if the applicant does not meet the established, disclosed criteria; Housing Provider may keep the screening fee if the application is considered and the applicant is not accepted because the applicant does not meet the established, disclosed criteria. 						
	OR							
	D.	Applicant shall	provide Social Security Numb	er/Tax Identification N	lumber to Housing Provid	der.		
The	unc	dersigned has rea	ad the foregoing section rega	arding the screening	fee and acknowledges	receipt of a completed copy.		
Applicant Signature						Date		
Ηοι	ısin	g Provider ackno	wledges receipt of this entire	e Application to Lea	se or Rent/Screening Fe	96.		
Ву:		kandra Toledo		DRE Lic.# <u>017</u>	80920	Date		
	Alex	candra Toledo						

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NOTICE REGARDING BACKGROUND INVESTIGATION REPORTS PURSUANT TO CALIFORNIA LAW

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