Casa De Vilarrasa

| _____383 East I St. | _____921 East 4th St |
| Benicia, CA 94510 | Benicia, CA 94510 |

To the applicant: Please fill out this form completely. It will be used to determine whether you are eligible for occupancy. This is a preliminary application and gives no lease or rental rights. If there is a vacancy in this apartment complex for which you are eligible, you will need to submit additional information to complete the processing of your application. **You must be sixty years or older.**

APPLICATION INFORMATION

Applicant: _____   SSN # _____

Phone Number: _____   Date of Birth: _____

Co-Applicant: _____   SSN # _____

Phone Number: _____   Date of Birth: _____

Current address: _____
                            Street and Apt #   City   State   Zip

Do you have Section 8? _____ yes ___no   **Veteran _____ yes _____ no**

INCOME INFORMATION.

List below all income received by all members of the household. Identify the source, such as employment, AFDC, Social Security, retirement, etc. List the amounts received on an annual basis. Use additional pages if necessary.

Income Source	**Annual amount**
_____	$_____
_____	$_____
_____	$_____
TOTAL	$_____

ASSETS: List below all assets for all members of the household. Assets means: any equity in real property other than your full-time residence, savings, stocks, bonds, and other forms of capital investments. Do not include automobiles or furniture. Briefly describe the assets and show the total estimated value. Use additional pages if necessary.

Assets   Value

_____ $_____
_____ $_____
_____ $_____

                          TOTAL $_____

PREVIOUS LANDLORDS

List landlords for the last five years. Give name, address, and telephone number and indicate amount of monthly rent paid. If you have no previous landlord references, use this space to provide two other references and indicate their relationship to you. Use additional pages if necessary.

Landlords   Monthly Rent

                                                         $_____

_____
Name

_____
Address
_____   How long rented for? _____
Telephone #

PRIOR EVICTIONS.

Have you ever been evicted from a residence? ____yes ____no

If yes, when? _____   why?_____

CERTIFICATION: To the best of my/our knowledge and belief, I/we certify that the foregoing information is true, complete, and correct. I/we understand that inquiries may be made to verify the information on this form and that false statements or omissions are grounds for disqualification and/or prosecution under the full extent of applicable California law.

_____   _____
Applicant   Date

_____   _____
Co-Applicant   Date