



RENTAL APPLICATION REQUIREMENTS

Thank you for inquiring about this Rental Property!

If you are interested in the possibility of renting one of our available properties, please complete one application for **each adult** who may occupy the property. Rental application processing fees are \$20 per adult applicant. Please submit cash or a check made payable to Purdy Homes when applying—incomplete applications will not be processed. You may fax, mail or drop off your application in the 24hr drop box at our office, or call for an email address.

Purdy Homes
1241 Carlsbad Village Dr. Ste A
Carlsbad, CA 92008

Phone: (760) 729-9600
Fax: (760) 729-9625

Please Note:

1. If you are a couple that has been married for less than two years, we must have the maiden name and previous address of the wife.
2. We will only process applications from prospective tenants, that have physically seen the property.

Each applicant MUST include the following:

Social Security Number
Current Address
Previous Address
Driver's License Number
Legible Copy of Driver's License
Proof of Income

The Security Deposit required to rent this property is usually equal to one month's rent. An additional deposit may be required if pets are allowed.

If you have any questions, please don't hesitate to call.

Thank you for your interest,

Purdy Homes

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RENTAL APPLICATION

Full Legal Name: _____ SSN# _____

Hm#: _____ Wk#: _____ Cell#: _____

Driver's License/ID# and State: _____ Birthdate: _____

Email Address: _____

HOUSING HISTORY:

Current Address: _____
STREET CITY STATE ZIP

How long? From (Mo/Yr): _____ To: _____ Last Rent Paid: Month _____ Amount: \$ _____

Rented From: _____ Owner ___ or Mgr ___ Phone #: _____

Reason for Leaving: _____

Previous Address: _____
STREET CITY STATE ZIP

How long? From (Mo/Yr): _____ To: _____ Last Rent Paid: Month _____ Amount: \$ _____

Rented From: _____ Owner ___ or Mgr ___ Phone #: _____

Reason for Leaving: _____

EMPLOYMENT HISTORY:

CURRENT EMPLOYMENT:

Company Name: _____ Company Phone: _____ Occupation: _____

Company Address: _____
STREET CITY STATE ZIP

Type of Business: _____ Supervisor: _____ Dates of Employment: From _____ To _____

Monthly Salary: _____

PREVIOUS EMPLOYMENT:

Company Name: _____ Company Phone: _____ Occupation: _____

Company Address: _____
STREET CITY STATE ZIP

Type of Business: _____ Supervisor: _____ Dates of Employment: From _____ To _____

Monthly Salary: _____

LIST ALL ADDITIONAL ADULTS AND CHILDREN WHO WILL OCCUPY UNIT:

Name: _____ Age _____ Relationship _____

Name: _____ Age _____ Relationship _____

Name: _____ Age _____ Relationship _____

Name: _____ Age _____ Relationship _____

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