

CROSSINGS AT ROSAMOND

3080 Sedona St.
Rosamond, CA 93560
Phone: (661) 256-4006
Fax: (661) 256-4052

AMERICAN TENANT SERVICES

ADDENDUM TO APPLICATION TO RENT UNIT #: _____

I / We agree and understand that a non-refundable fee of \$35.00 paid this date _____ is for the processing of my/our application and the cost of verification of my/our Credit, Rental History and Employment, and all other matters which they may require to process tenant application request.

X _____ X _____
(Initials) (Initials)

I/We give permission to release information regarding my/our current and past employment(s), rental history, to run a credit report, and/or a criminal background check.

I understand if information received from any of the above reports does not meet property requirements, my application will be denied.

X _____ X _____ X _____
Applicant(s) Signature Date of Birth Date

X _____ X _____ X _____
Applicant(s) Signature Date of Birth Date

I hereby certify this to be a true and correct copy of the original.

X _____
Authorized Agent for Owner Date