

OFFER TO RENT

McLEAN COMPANY RENTALS

477 S. PALM CANYON DRIVE, STE.1 PALM SPRINGS CA 92262 VOICE: 322-2500 FAX: 323-7878

On this day _____ 2008 from the undersigned, hereinafter called "Applicant"
 _____ who offers to rent from the OWNER the premises described
 as: _____ Unit # _____.

RENT:

I offer to pay \$ _____ rent per mo.
 Rent will be prorated on 2nd month based on 30 day mo

SECURITY DEPOSIT:

Security Deposit \$ _____
 Other Deposit \$ _____

Most deposits are equal to rent.

Any requested change to property, (including cleaning), prior to move in must be requested in writing under additional terms, and agreed to as part of the "Offer to Rent".

Additional Terms: _____

| Additional Terms and Conditions | | |
|---------------------------------|------------|-------------|
| | Owner pays | Tenant pays |
| Water | | |
| Trash | | |
| Electric | | |
| Gas | | |
| Cable | | |
| Gardener | | |
| Pool | | |
| Other | | |
| Other | | |

I want to Move In: _____
 Tenancy shall be for a period of _____ months
 How did you hear about us? _____

This offer is subject to final approval by the property Owner and shall be deemed denied unless the Owner accepts the offer by _____.
 Notice of acceptance shall be made by mail, telephone or in person.

Best phone number to reach you: _____
Email: _____

All applicants over the age of 18 must fill out a rental application, and sign rental agreement prior to issuance of keys to the rented unit. We may report unpaid rent to credit agencies.

I understand that once an offer has been accepted and a deposit has been paid; said deposit is subject to forfeit should tenant choose not to move-in or cancel.

Move in Cost Projections based on offer:

- Rent: \$ _____
- Security Deposit: \$ _____
- Pro-rated Rent: \$ _____
- Others: \$ _____
- TOTAL MOVE-IN COST \$ _____

Pro-rated rent is to be paid with move in costs, if charge is less than \$300.00.

All offers are subject to negotiation.

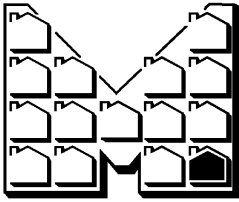


TO BE PAID IN CASH, CASHIER'S CHECK OR MONEY ORDER.
Prorated rent or any rent incentives are paid on the second month.

 Applicant's Signature Date

Owner approves all terms and conditions of the offer by tenant. Counter Offer must be in writing and signed by both parties.

 Owner's Signature Date



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477 S. Palm Canyon Drive, suite 1
PALM SPRINGS CA 92262

VOICE: 322-2500

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RENTAL APPLICATION & OFFER INFORMATION

1. **Fill out Rental Application.** Fill out the application form completely. Our reference checking includes verification of employment and rental history. Provide us your current pay stub and identification. If retired or self-employed, a copy of last year's tax return and a current bank statement. Incomplete requirements shall delay processing. Kindly include all telephone numbers where we can reach you.
2. **The Credit Check.** A Twenty Dollars (\$20.00) application/processing fee shall be charged to each applicant. Said fee is non-refundable.
3. **The Credit Check Information.** We fax your application to the credit verification company within twenty four-(24) hours from receipt hereof. Credit record information shall be received within the next day.
4. **The Decision.** All information shall be relayed to the Owner. Decision for approval or disapproval shall be based on the credit record information and the owner as well. The unit/property could only be hold for two-(2) weeks with a deposit once the application has been approved.
5. **The Offer to Rent.** The negotiable part. Details such as rent amount, move-in date, security deposit payment, length of lease, utilities paid, cleaning extras, and among others are to be filled-up properly on this sheet.
6. **Upon Acceptance of all Terms and Conditions.** First Month's Rent and Security Deposit are to be paid by cashiers check or money order once the lease agreement has been signed and keys turn-over.
7. **Utilities.** It is the tenant's responsibility. Please be aware that electric, cable and gas shall be turned on for two-(2) to seven-(7) days. Plan accordingly!
8. **Back Up Offers.** All offers shall be accepted by MCR up until written acceptance by both owner and potential tenant. Offer must include deposit in the form of money order or cashier's check.

CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

The California Apartment Association supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.



McLEAN COMPANY RENTALS

477 E. Palm Canyon Drive, Suite 1, Palm Springs, CA 92262
760-322-2500 Fax:760-323-7878

GOOD FAITH HOLDING DEPOSIT

Property Address _____

Hold For _____

Lease Start Date _____

Deposit Amount \$ _____

Please Note: The purpose of the Good Faith Holding Deposit for the above referenced address is to hold the property for the person(s) listed above while their application(s) is being processed and does not signify that you have been approved for the property. By submission of the Good Faith Holding Deposit the deposit becomes NON-REFUNDABLE regardless of situation, intent, or state of mind unless otherwise deemed returnable by way of disqualification by McLean Company Rentals. Disqualification is defined by McLean Company Rentals and may include, but not limited to credit scores, rental history and debt ratios. If you are accepted for the above referenced property the Good Faith Holding Deposit will be applied toward your Security Deposit. If you are approved but fail to enter into the lease within 3 days of verbal and/or written approval and/or does not take possession after lease signing, the FULL AMOUNT of the Good Faith Holding Deposit shall be forfeited to the landlord and/or McLean Company Rentals in addition to any penalties as provided in the lease if the lease has been signed by the applicant(s).

By signing this document, you acknowledge the facts concerning the Non-Refundable nature of the Good Faith Holding Deposit and accept them as binding.

Proposed Tenant Date

Proposed Tenant Date

Proposed Tenant Date

Proposed Tenant Date

Landlord/Property Management Date

APPLICATION TO RENT AND RENTAL DEPOSIT

CALIFORNIA ASSOCIATION OF REALTORS® (CAR) STANDARD FORM

Individual applications required from each occupant 18 years of age or older.

Application to rent property located at:

| | | | | | |
|---|----------------------|--|----------|--------------------------|--------------------------|
| LAST NAME | | FIRST NAME | | MIDDLE INITIAL | SOCIAL SECURITY NUMBER |
| OTHER NAMES USED IN THE LAST 10 YEARS/ LAST NAME | | | OTHER ID | | WORK PHONE NUMBER () |
| DATE OF BIRTH | DRIVER'S LICENSE NO. | EXPIRATION | STATE | HOME PHONE NUMBER () | |
| EMAIL ADDRESS: | | | | | |
| PROPOSED OCCUPANTS NAME: | | | AGE: | RELATIONSHIP | |
| PROPOSED OCCUPANTS NAME: | | | AGE: | RELATIONSHIP | |
| PROPOSED OCCUPANTS NAME: | | | AGE: | RELATIONSHIP | |
| An application to rent is required for any occupant 18 years of age or over. If additional explanation is needed use back page. | | | | | |
| Pets? | Describe: | Will you have Liquid filled furniture? | | Describe: | |

| | | | | |
|--------------------|----------|----------------|--------------------|----------|
| PRESENT ADDRESS | | CITY | STATE | ZIP CODE |
| DATE IN | DATE OUT | OWNER/MGR NAME | OWNER/MGR PHONE NO | |
| REASON FOR LEAVING | | | | |

| | | | | |
|--------------------|----------|----------------|--------------------|----------|
| PREVIOUS ADDRESS | | CITY | STATE | ZIP CODE |
| DATE IN | DATE OUT | OWNER/MGR NAME | OWNER/MGR PHONE NO | |
| REASON FOR LEAVING | | | | |

| | | | | |
|---|---------------------------|------------------|--|--|
| PRESENT OCCUPATION OR SOURCE OF INCOME: | | EMPLOYER NAME | | |
| HOW LONG WITH THIS THIS EMPLOYER? | SUPERVISOR'S PHONE #: () | EMPLOYER ADDRESS | | |
| NAME OF YOUR SUPERVISOR | | CITY, STATE, ZIP | | |

| | | | | |
|---------------------------------------|---------------------------|------------------|--|--|
| PRIOR OCCUPATION OR SOURCE OF INCOME: | | EMPLOYER NAME | | |
| HOW LONG WITH THIS THIS EMPLOYER? | SUPERVISOR'S PHONE #: () | EMPLOYER ADDRESS | | |
| NAME OF YOUR SUPERVISOR | | CITY, STATE, ZIP | | |

| | | | | | | |
|----------------------|----|-----|------|-------|------|--------------------|
| CURRENT GROSS INCOME | \$ | PER | WEEK | MONTH | YEAR | POSITION OR TITLE: |
| OTHER INCOME | \$ | PER | WEEK | MONTH | YEAR | SOURCE: |

| CREDIT INFORMATION | Name of Creditor | Account Number | Monthly Payment | Balance Due |
|--------------------|------------------|----------------|-----------------|-------------|
| | | | | |
| | | | | |

| BANK INFORMATION | Name of Bank | Address/Branch | Account Number | Type of Account |
|------------------|--------------|----------------|----------------|-----------------|
| | | | | |
| | | | | |

| Auto Make | Model | License Number | State of Registry | Color |
|-----------|-------|----------------|-------------------|-------|
| | | | | |
| | | | | |

| In Case of Emergency, notify: | Address | Phone | City | Relationship |
|-------------------------------|---------|-------|------|--------------|
| 1. | | | | |
| 2. | | | | |
| PERSONAL REFERENCES: | Address | Phone | City | Occupation |
| 1. | | | | |
| 2. | | | | |

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____
 Have you ever been convicted for selling, distributing or manufacturing illegal drugs? _____ Felony within the last seven years? _____ If yes, explain.

Applicant represents that the above statements are true and correct and hereby authorizes verification of the above items including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request. Applicant consents to allow Owner/Manager to disclose tenancy information to previous or subsequent owners/managers. The cost of \$20.00 per person for State of California applicants, and \$40.00 per person for out of state applicant (s). **The cost of the credit report is not a deposit or rent, and will not be applied to future rent or refunded, even if the application to rent is declined.** Applicant understands that the landlord may terminate any rental agreement entered into for any misrepresentation made above.

Applicant (s) has/have deposited the Sum of _____ Dollars \$ _____ evidenced by: Cash _____ Cashier's Check _____ payable on the property located at: _____ at a monthly rent of \$ _____. The property is to be occupied only by the person (s) named in the application. In the event the application to rent is not approved within 5 days, any advance deposit shall be returned to applicant. If approved, the month-to-month, lease, or other _____ shall commence on _____, 2004. Additional Terms: _____

| | | | |
|-----------------|-------------|------------------------------------|-----------|
| Applicant _____ | Phone _____ | Time/Date Received in Office _____ | By: _____ |
|-----------------|-------------|------------------------------------|-----------|

This application is part of the offer to rent form. All offers are subject to negotiation. Time is of the essence.

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