

Email to Anastasio1Re@gmail.com
Fax to 415-780-3203
Mail to Stanley Anastasio
579 Duncan Street
SF, CA 94131

APPLICANT'S INFORMATION

Name: _____ DOB _____

Residence Address _____

How Long _____ Rent _____ Cell Phone _____

Home Phone _____ Work Phone _____

Owner _____ Phone _____

Prev. Address _____

Owner _____ Phone _____

Children _____ Ages _____ Pets _____

Employed by _____ Position _____

Address _____ Phone _____

How Long _____ Monthly Salary _____ Other Income _____

Bank Accounts _____

E-Mail Address _____ Contact in case of emergency _____

Social Security # _____ Driver's License _____

Do you smoke tobacco products? _____ Do you smoke marijuana? _____ If "yes", do you have
a medical marijuana card? _____ Have you ever been evicted? _____ Do you have need for a
service animal? _____ Have you filed bankruptcy during the past five years? _____

The undersigned applicant hereby grants owner permission to obtain credit reports and to verify above information by contacting any of the above references.

Applicant Date _____

Applicant Date _____