



Miracle Mile Residential Rental Application

Thank you for your interest in making a home with us. Please use one form per applicant — every occupant 18 or older fills out their own. Print clearly in ink and answer each question so we can review your application without delay. If anything here is unclear, or you need this form in another format, just call the leasing office and we will help.

The Property TO BE COMPLETED BY LANDLORD

Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other:

PROPERTY ADDRESS / UNIT

BEDS (#)

BATHS (#)

SQUARE FEET

MONTHLY RENT (\$)

SECURITY DEPOSIT (\$)

LEASE START DATE (MM/DD/YYYY)

Lease Type: ☐ Fixed term ☐ Month-to-month

Pets allowed? ☐ Yes ☐ No Smoking allowed? ☐ Yes ☐ No Parking? ☐ Yes ☐ No

The Applicant

FULL LEGAL NAME

SSN OR ITIN

PHONE NUMBER

DATE OF BIRTH (MM/DD/YYYY)

EMAIL

ID NUMBER & ISSUING STATE

Photo ID: ☐ Driver's License ☐ State ID ☐ Passport ☐ Other

IF YES, LIST NAMES AND AGES

Additional occupant(s)? ☐ Yes ☐ No

IF YES, DESCRIBE (TYPE, BREED, WEIGHT)

Pet(s) or assistance animal(s)? ☐ Yes ☐ No

A service animal or support animal is not a pet. No pet rent or pet deposit is charged for an assistance animal, and reasonable accommodation requests are handled separately from this application.

Current Residence

Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other:

PROPERTY ADDRESS

MONTHLY RENT (\$)	BEDS (#)	BATHS (#)	SQUARE FEET

LEASE START (MM/DD/YYYY)	LEASE END (MM/DD/YYYY)

Previous Residence — 1

Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other:

PROPERTY ADDRESS

MONTHLY RENT (\$)	BEDS (#)	BATHS (#)	SQUARE FEET

LEASE START (MM/DD/YYYY)	LEASE END (MM/DD/YYYY)

Previous Residence — 2

Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other:

PROPERTY ADDRESS

MONTHLY RENT (\$)	BEDS (#)	BATHS (#)	SQUARE FEET

LEASE START (MM/DD/YYYY)	LEASE END (MM/DD/YYYY)

Current Employer

COMPANY NAME

EMPLOYER'S ADDRESS

TITLE / OCCUPATION

GROSS MONTHLY INCOME (\$)

START DATE (MM/DD/YYYY)

SUPERVISOR NAME

SUPERVISOR PHONE

SUPERVISOR EMAIL

Previous Employer

COMPANY NAME

EMPLOYER'S ADDRESS

TITLE / OCCUPATION

GROSS MONTHLY INCOME (\$)

FOR HOW LONG? (MONTHS)

SUPERVISOR NAME

SUPERVISOR PHONE

SUPERVISOR EMAIL

Other Income & Rental Assistance

All lawful sources of income are considered equally. A Section 8 Housing Choice Voucher or other rental subsidy is a lawful source of income under California Government Code § 12955, and the subsidy portion is not counted against any income requirement.

SOURCE (SELF-EMPLOYMENT, BENEFITS, PENSION, SUPPORT, OTHER)

GROSS MONTHLY AMOUNT (\$)

SOURCE

GROSS MONTHLY AMOUNT (\$)

IF YES, ISSUING AGENCY

Will a housing voucher or subsidy be used? ☐ Yes ☐ No

Vehicle(s) _____

Do you own a vehicle? ☐ Yes (describe below) ☐ No

MAKE	MODEL	YEAR	COLOR	PLATE #	STATE

Do you own a second vehicle? ☐ Yes (describe below) ☐ No

MAKE	MODEL	YEAR	COLOR	PLATE #	STATE

References _____

FULL NAME	RELATIONSHIP	EMAIL	PHONE

Emergency Contact _____

FULL NAME	RELATIONSHIP	PHONE

ADDRESS

Background Information

Have you ever been evicted? ☐ Yes ☐ No

If yes, describe:

Have you ever broken a rental agreement, terminated a lease early, or intentionally refused to pay rent when due? ☐ Yes ☐ No

If yes, describe:

Have you filed for bankruptcy, or had any judgments, collections, or tax liens filed against you in the last seven (7) years? ☐ Yes ☐ No

If yes, describe:

Have you ever been convicted of, or pleaded guilty or “no contest” to, a felony or misdemeanor offense? ☐ Yes ☐ No

If yes, describe:

Do not disclose an arrest that did not lead to a conviction, a conviction that has been sealed, dismissed, expunged, vacated or pardoned, a juvenile adjudication, or participation in a diversion or deferral program. Criminal history is not considered where local law prohibits it, and where it may be considered it is reviewed individually with regard to the nature of the offense, the time elapsed and evidence of rehabilitation.

Are you subject to sex registration laws? ☐ Yes ☐ No

If yes, describe:

Co-Signer / Guarantor IF APPLICABLE

FULL LEGAL NAME SSN OR ITIN

PHONE EMAIL RELATIONSHIP TO APPLICANT

CURRENT ADDRESS

EMPLOYER GROSS MONTHLY INCOME (\$)

A co-signer authorizes the same screening described in this application and, if the application is approved, will be asked to sign a separate guaranty of the lease.

Screening Fee & Applicant Rights

APPLICATION SCREENING FEE CHARGED (\$)	DATE PAID	RECEIVED BY

Under California Civil Code § 1950.6 the screening fee may not exceed the landlord's actual out-of-pocket screening costs, and in no case may it exceed the statutory maximum of **\$65.86 per applicant** for 2026 (a \$30 base adjusted annually for the Consumer Price Index). You will be given a receipt itemizing the out-of-pocket expenses and time spent on your screening, and any unused portion of the fee will be refunded to you.

Your rights as an applicant

- **Copy of your consumer report.** If a consumer credit report is obtained with your screening fee, you will automatically be provided a copy at no additional charge within seven days of our receipt of it, whether or not your application is approved.
- **Receipt and refund.** You will receive a receipt for the fee paid, itemizing out-of-pocket expenses and time spent. Any portion of the fee not used for screening costs will be refunded.
- **Reusable tenant screening report.** If you provide a reusable tenant screening report that is not more than 30 days old, prepared by a consumer reporting agency at your request and directly available to us at no cost, we will accept it in place of ordering our own report and will not charge you a screening fee. Check below if you are providing one.
- **No fee without an available unit.** A screening fee is collected only when a unit is available or is expected to be available within a reasonable period.
- **Written reason for denial.** If your application is denied, you may request the reason in writing, and you will receive an adverse action notice identifying the consumer reporting agency used and your right to dispute its accuracy.

AGENCY & REPORT DATE

Are you providing a reusable tenant screening report? ☐ Yes ☐ No

Equal Housing Opportunity

Miracle Mile Properties, Inc. does business in accordance with all federal, state and local fair housing laws. We do not discriminate on the basis of race, color, religion, sex, gender, gender identity or expression, sexual orientation, marital status, national origin, ancestry, familial status, source of income, disability, genetic information, veteran or military status, citizenship, primary language, immigration status, age, or any other characteristic protected by law. All applications are evaluated under the same written criteria, and applications are processed in the order received.

If you have a disability and need a reasonable accommodation or modification in order to apply for or use this housing, please contact the leasing office at (323) 709-3186 or applicant@mmpia.com.

Consent & Acknowledgment

I certify that I am at least 18 years of age and that all information given on this application is true and correct. I authorize the Landlord and its agents to obtain a consumer credit report and an investigative consumer report including, but not limited to, credit history, OFAC search, landlord/tenant court record search and, where permitted by law, criminal record search. I authorize the release of information from previous or current landlords, employers, bank representatives and personal references. I agree to furnish additional credit and/or personal references upon request. I understand incomplete or incorrect information provided in this application may cause a delay in processing which may result in denial of tenancy. This investigation is for resident screening purposes only and is strictly confidential. I hereby hold the Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information. Applicant represents that all information provided is true and correct. Any misrepresentation or omission is grounds for immediate rejection of this application or termination of the lease.

Your rights under the Fair Credit Reporting Act

- You have a right to request disclosure of the nature and scope of the investigation.
- You must be told if information in your file has been used against you.
- You have a right to know what is in your file, and this disclosure may be free.
- You have the right to ask for a credit score (there may be a fee for this service).
- You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete or unverifiable information.

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C. 20580.

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These consumer reports may be obtained from one or more of the following consumer reporting agencies:

- Equifax, E.C.I.F., P.O. Box 740241, Atlanta, GA 30374-0241, (800) 685-1111
- Trans Union, Regional Disclosure Center, 1561 Orangethorpe Ave., Fullerton, CA 92631, (714) 738-3800
- Experian, Consumer Assistance, P.O. Box 949, Allen, TX 75002, (888) 397-3742

These reports are defined as investigative consumer reports under the California Investigative Consumer Reporting Agencies Act (Civil Code § 1786 et seq.) and may contain information on my character, general reputation, personal characteristics and mode of living. I understand I have the right to request a copy of any investigative consumer report obtained about me, and that the agency’s privacy practices are available on request. I authorize the owner/agent to obtain the reports described above.

☐ Check here to request a free copy of any investigative consumer report obtained about you.

APPLICANT'S SIGNATURE	DATE
PRINTED NAME	APPLICATION FEE PAID (\$)

Return the completed application to Miracle Mile Properties, Inc., 5150 Wilshire Blvd, Suite 100, Los Angeles, CA 90036, or by email to applicant@mmpia.com. Questions: (323) 709-3186.