Santiago

APPLICATION FOR RENTAL

| Application Date: | |
|-------------------|--|
|-------------------|--|

| APPLICANT INFORMATION | | | | | | | | | | | |
|---|------------|------------|-----------|-----------------|---------------|-------------|-----------|------------|---------------------|--|--|
| LAST NAME | | FIRST NAME | | | M.I. | | | BIRTH DATE | | | |
| HOME PHONE | (| WORK PI | HONE | | CELL PHO | ONE | EMAIL | | | | |
| PHOTO ID/ TYPE | 1 | NUMBER | | | ISSUING | GOVERNMENT | EXP DATE | | | | |
| DO YOU CURRENTLY LIVE IN UNIVERSITY HILLS? | | | | | | □ NO | | | | | |
| HAVE YOU EVER LIVED IN UNIVERSITY HILLS? | | | | | | | | | | | |
| IF YES, PROVIDE ADDRESS: | | | | | | | | | | | |
| CURRENT ADDRESS | | | | | | | | | | | |
| STREET ADDRESS | | | | | CITY | | STATE | | ZIP | | |
| OTHER OCCUPANTS | | | | | | | | | | | |
| LIST NAMES OF AL | L ADDITION | NAL | | | | | | | | | |
| | | | | | | | | | | | |
| PETS | | | | | | | | | | | |
| PETS? DESCRIBE | | | | | | | | | | | |
| VEHICLE INF | ORMA | TION | | | | | | | | | |
| 1. MAKE & MODEL | | | | | | YEAR | | LICENS | E NO. & STATE | | |
| 2. MAKE & MODEL | | | | | | | YEAR | | LICENSE NO. & STATE | | |
| UNIVERSITY INFORMATION | | | | | | | | | | | |
| DEPARTMENT NAME | | | | JOB TITLE | | | | TITLE CODE | | | |
| SENATE/ NON SENATE/ STAFF | | | HIRE DAT | E | UCI ID NUMBER | | | | | | |
| UCI CONTACT PERSON OFFICE PHONE | | | | | | | | | | | |
| CHECK APPROPRIATE CATEGORY | | | | | | | | | | | |
| □ NEWLY RECRUITED FACULTY □ NEWL | | | Y RECRUI | TED ACADEMIC ST | AFF UNIVERS | | ITY STAFF | | | | |
| □ CURRENT FACULTY □ CURF | | | RENT ACAD | EMIC STAFF | | | | | | | |
| Check your model and floor preferences | | | | | | | | | | | |
| □ AVALON | ☐ GROU | IND | SECO | ND [| THIRD | □ DANA | ☐ GROUN | ID □ SE | COND | | |
| □ BALBOA | ☐ GROU | IND | SECON | ID 🗆 | THIRD | ☐ EL CAMINO | □ GROUN | ID 🗆 SE | COND | | |
| ☐ CAPISTRANO | ☐ GROU | | SECON | ID 🗆 | THIRD | | | | | | |
| Desired move-in date: | | | | | | | | | | | |
| | | | | | | | | | | | |
| Applicant represents that all the above statements are true and correct and authorizes verification of the above items. Providing false information on the application is a material breach of the rental contract. | | | | | | | | | | | |
| Date | | | App | olicant Si | gnature | | | | | | |

Please mail, fax, or email completed application to:

ICHA Rental Office

1083 California Ave., Irvine, CA 92617 949.824.6254 Fax 949.824.6697

rentalhousing@icha.uci.edu

If you have not received an email confirmation within 2 weeks of your submission, please contact the ICHA Rental Office
*Application is valid for 2 years following this date.

Please reapply after 2 years if you wish to remain on waiting list

