

RIVERWOOD
APARTMENTS

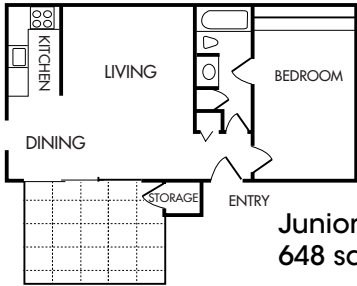


Riverwood Apartments

2942 Soscol Avenue • Napa, CA 94558

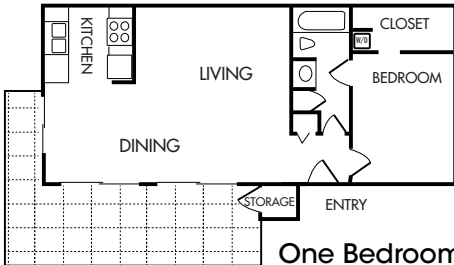
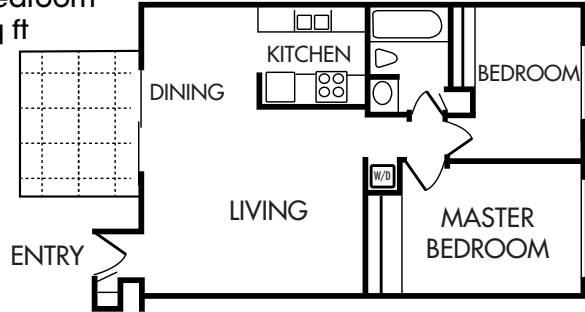
Call now for information: (707) 252-1855
or email at: office@riverwoodapartments.com

Riverwood Floorplans



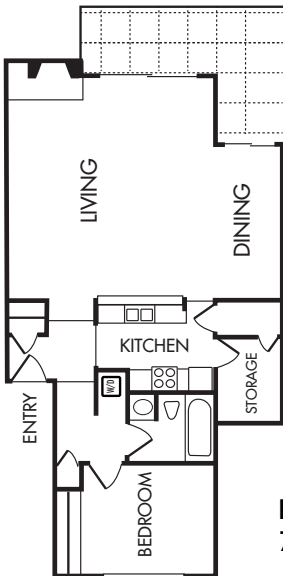
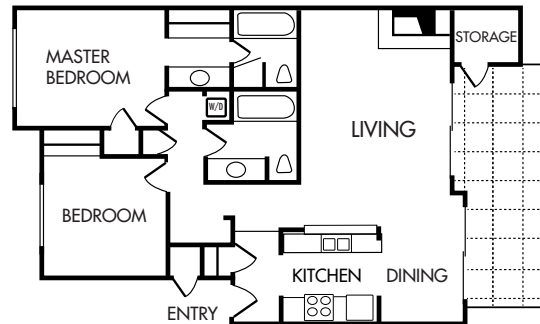
Junior One Bedroom
648 sq ft

Two Bedroom
900 sq ft



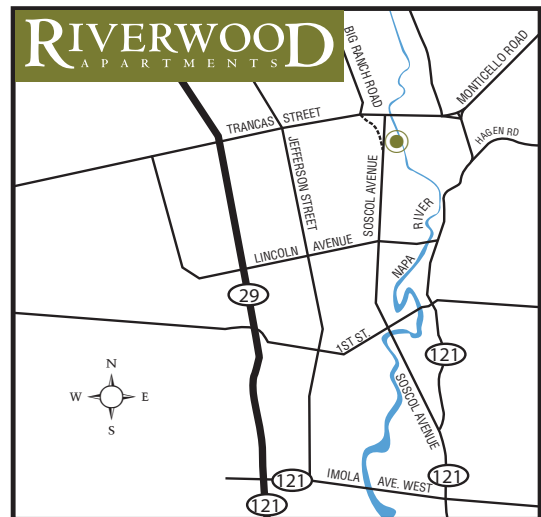
One Bedroom
720 sq ft

Deluxe Two Bedroom
1149 sq ft



Deluxe One Bedroom
777 sq ft

Office Hours:
Monday — Friday
9 am to 5 pm





**RENTAL APPLICATION
RIVERWOOD APARTMENTS
2942 SOSCOL AVENUE
NAPA, CALIFORNIA 9455
Page 1 of 2**

Office Use Only
Application received by: _____
Date: _____
Application fee: \$ _____
Deposit: \$ _____

Notice: Each co-applicant and/or co-signer must complete a separate Rental Application Form

The undersigned hereby makes application to rent apartment number _____,
located at _____ Soscol Avenue, Napa, California 94558,
beginning on _____ 20 _____,
at a monthly rental of \$ _____.

PLEASE TELL US ABOUT YOURSELF			
Full name		Driver's license #	
Birth day		Social security #	
Other occupants		E-mail address	
How did you hear about Riverwood Apartments?			

PLEASE GIVE YOUR RESIDENCE HISTORY (Beginning with Most Current)			
	CURRENT ADDRESS	PRIOR ADDRESS	PRIOR ADDRESS
Street			
City State Zip			
Your phone #			
Rent amount			
From __ to __			
Owner/agent name			
Owner/agent phone #			
Reason for leaving			

PLEASE GIVE YOUR EMPLOYMENT INFORMATION			
YOUR CURRENT STATUS: __ Employed Full-Time __ Employed Part-Time __ Student __ Retired __			
	CURRENT OCCUPATION	PRIOR OCCUPATION	PRIOR OCCUPATION
Current Employer			
Employer phone #			
Address			
City State Zip			
Employed from __ to			
Job description			
Supervisor			
Phone number			
Salary (\$/____)			
Other income - Amount \$		Source	



**RENTAL APPLICATION
RIVERWOOD APARTMENTS
2942 SOSCOL AVENUE
NAPA, CALIFORNIA 94558
Page 2 of 2**

PLEASE GIVE YOUR BANK AND CREDIT REFERENCES, AND VEHICLE INFO					
	BANK	BRANCH	ACCOUNT #	CITY, STATE, ZIP	
Checking					
Savings					
CREDIT REFERENCES			ACCOUNT #	CITY, STATE, ZIP	
Contacts	NAME, ADDRESS		PHONE #	CITY, STATE, ZIP	
Friend					
Family					
Vehicles	MAKE, MODEL	COLOR	YEAR	LICENSE	STATE

HAVE YOU EVER: Filed for bankruptcy? No Yes
 Been evicted from tenancy? No Yes
 Willfully or intentionally refused to pay rent when due? No Yes

DO YOU HAVE PETS? Yes No

Please give any other information which might help management evaluate this application: _____

I warrant that all the above statements are true and hereby authorize the verification of the above information including but not limited to credit reports, character reports, verification of rental and employment history and agree to furnish additional information on request. False, fraudulent or misleading information may be grounds for denial of tenancy, or subsequent eviction. I authorize processing of this application regardless of whether there are current vacancies or vacancies expected within a reasonable period of time. Receipt of a non-refundable application fee of \$ _____ is acknowledged.

I hereby pay a holding deposit of \$ _____, to be refunded to me if this application is not approved and accepted by owner or agent within _____ business banking days. I hereby waive any claim for damages by reason of nonacceptance of this application. Should my application be accepted and I subsequently cancel it, this holding deposit shall be retained by owner to compensate for lost rent incurred for having removed this apartment from the rental market and/or from a cancellation occurring more than 30 days after acceptance of the approved application. Such forfeiture shall be calculated by dividing the monthly rate by 30 days and multiplying times the number of lost days.

Upon execution of a lease for _____ months as well as payment of all sums due prior to occupancy, this holding deposit will be converted to security deposit. Any occupancy availability date offered by the owner and or agent is subject to the scheduled vacation of the assigned apartment by the current resident, if any, and I hereby waive any claim for damages should such availability date change subsequent to approval and acceptance of this application.

The above information, to the best of my knowledge, is true and correct.

Signature of Applicant _____

Date Signed _____