



CAMELLIA REALTY & PROPERTY MANAGEMENT

2801 Waterman Blvd., #150, Fairfield, CA 94534.
Lic: # 00878746 Tel: (707) 422-9269
Open Monday-Thursday: 9am-4pm, Friday: 9am-1pm
www.camelliarealty.net

Property Address _____

Move-In Date Requested: _____

Rental Policies and Procedures:

- Each applicant 18 or older must completely fill out application-Incomplete applications will not be accepted.
- When applying, each applicant must submit copy of a current form of government issued photo identification. (i.e. drivers licensed, passport, state ID, military ID. Etc.)
- Each property is first come, first served. We will only review applications in the order in which they were received.
- The \$40.00 application fee will only be required if we order a credit report. We will order a credit report if you have seen the property and it is your turn to have your application considered.
- No co-signers or guarantors-no exceptions.
- Applicants with no SSN or ITIN can provide alternate documentation to aid in evaluating credit worthiness. (i.e. 12 recent months of paid utility bills, rent or any monthly bills that show consistent and timely payment)
- Applicants must have combined gross, verifiable legal income of no less than two and one half (2 ½) times the monthly rent. Pay stubs, W-2, 1099, tax returns or bank statements will be necessary to verify income. Income not reported to the IRS (under the table) will not be considered.
- Bankruptcies will not be considered unless fully discharged.
- Applicant screening will be performed on all applicants to include credit report and eviction search.
- Occupancy standard is two persons per bedroom, plus one. (2 bedrooms=up to 5 occupants)
- **Once an applicant is approved, if property is ready, move in is expected immediately.** If agreed upon, and occupancy does not take place immediately, then the amount equal to the security deposit will be accepted as a Holding Deposit. If a Holding Deposit Agreement was executed, the funds from the holding deposit will be used toward the security deposit.
- One month of rent and the security deposit will be collected at the time of the execution of the Rental Agreement. The second months rent will be prorated. Rent is due on the first of each month.
- Personal checks are not accepted for the first months rent or security deposit - **secured funds or cash only.**
- Please note that sometimes an exact move-in date is not available due to pending repairs in process to prepare the property for occupancy.

To turn in applications, you can drop off at our office, fax 707 422-5974 or email to nancy@camelliarealty.net.

Applicant(s) agree to keep the home "smoke free". No smoking inside of the home – including the garage, if applicable. Applicant(s) acknowledges and agrees to the above terms.

Applicants Signature: _____ Date: _____

Tenant
 Guarantor

Name of Applicant: _____

APPLICATION TO RENT

(All sections must be completed) **Individual applications required from each occupant 18 years of age or older.**

Last Name		First Name		Middle Name		Social Security Number or ITIN	
Other names used in the last 10 years				Work phone number ()		Home phone number ()	
Date of birth		E-mail address				Mobile/Cell phone number ()	
Photo ID/Type		Number		Issuing government		Exp. date	
Other ID							
1. Present address		City		State		Zip	
Date in		Date out		Landlord Name		Landlord phone number	
Reason for moving out						Current rent \$ /Month	
2. Previous address		City		State		Zip	
Date in		Date out		Landlord Name		Landlord phone number	
Reason for moving out						Rent at move-out \$ /Month	
3. Next previous address		City		State		Zip	
Date in		Date out		Landlord Name		Landlord phone number	
Reason for moving out						Rent at move-out \$ /Month	
Proposed Occupants: List all in addition to yourself	Name			Name			
	Name			Name			
	Name			Name			
Do you have pets?	Describe			Do you have a waterbed?	Describe		
How did you hear about this rental?							
A. Current Employer Name				Job Title or Position		Dates of Employment	
Employer address				Employer/Human Resources phone number ()			
City, State, Zip				Name of your supervisor/human resources manager			
Current gross income				Check one			
\$				Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year			
B. Prior Employer Name				Job Title or Position		Dates of Employment	
Employer address				Employer/Human Resources phone number ()			
City, State, Zip				Name of your supervisor/human resources manager			
Other income source _____ Amount \$ _____ Frequency _____							
Other income source _____ Amount \$ _____ Frequency _____							



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Tenant
 Guarantor

Name of Applicant: _____

Name of your bank	Branch or address	Account Number	Type of Acct

Please list ALL of your financial obligations below.

Name of Creditor	Address	Phone Number	Monthly Pmt. Amt.
		()	
		()	
		()	
		()	
		()	
		()	

In case of emergency, notify:	Address: Street, City, State, Zip	Relationship	Phone
1.			
2.			

Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				
2.				

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Other motor vehicles: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____



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Tenant
 Guarantor

Name of Applicant: _____

NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT

Landlord does not intend to request an investigative consumer report regarding the Applicant.

Unless the box above is checked, Landlord intends to request an investigative consumer report regarding the Applicant's character, general reputation, personal characteristics, and mode of living. Under Section 1786.22 of the California Civil Code, the files maintained on you by the investigative consumer agency shall be made available to you during business hours and on reasonable notice, provided you furnish proper identification, as follows: (1) You may appear at the investigative consumer reporting agency identified below in person, (2) you may make a written request for copies to be sent by certified mail to a specified addressee, or (3) you may make a written request for a summary of the file to be provided over the telephone. The agency may charge a fee, not to exceed the actual duplication costs, if you request a copy of your file. The agency is required to have personnel available to explain your file to you, and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. If you are accompanied by a person of your choosing, the agency may require you to furnish a written statement granting permission to the investigative consumer reporting agency to discuss your file in the other person's presence. The agency that will prepare the report(s) identified in this section is listed below:

Tenant Alert

Name of Agency _____

23801 Calabasas Rd., #1022, Calabasas, CA 91302

Address of Agency _____

If you would like a copy of the report(s) that is/are prepared, please check the box below:

I would like to receive a copy of the report(s) that is/are prepared

If the box above is checked, Landlord agrees to send the report to Applicant within three (3) business days of the date the report is provided to Landlord. Landlord may contract with another entity to send a copy of the report.

Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agrees to furnish additional credit references upon request. Applicant authorizes Landlord to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history and employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or subsequent Landlords.

Landlord will require a payment of \$ 40.00 , which is to be used to screen Applicant.

The amount charged is itemized as follows:

- | | |
|---|-----------------|
| 1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports | \$ <u>17.00</u> |
| 2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) | \$ <u>23.00</u> |
| 3. Total fee charged | \$ <u>40.00</u> |

The undersigned Applicant is applying to rent the premises designated as:

Apt. No. _____ Located at _____

The rent for which is \$ _____ per _____. Upon approval of this application, and execution of a rental/lease agreement, the applicant shall pay all sums due, including required security deposit of \$ _____, before occupancy.

Date

Applicant (signature required)



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EMPLOYMENT VERIFICATION FORM

- This form is used to obtain information regarding the employment history of Applicants for rental housing. The information provided by the current or former Employer may be used solely for the purpose of evaluating the application for rental housing.
- The Landlord requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. **Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)**

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information
*I hereby authorize the release of the information requested on this Employment Verification Form to the Landlord listed below.
I hereby acknowledge that the Landlord can make copies of this executed page in order to obtain the information requested.*

Name _____ Phone number (_____) _____
Signature _____ Date _____

TO BE COMPLETED BY LANDLORD

2. Person requesting the employment reference

Name of Landlord Camellia Realty
Address 2801 Waterman Blvd. Unit # 150
City Fairfield State CA Zip 94534
Phone number (707) 422-9269 Fax number (707) 422-5974

3. Applicant's employment information:
 Present **OR** Prior Occupation (check one)

Employer Name _____
Employer Address _____
City _____ State _____ Zip _____
Supervisor's/HR Manager's Name _____ Employer/HR Phone number (_____) _____
Beginning and Ending Dates of Employment _____
Current Gross Income (if applicable) \$ _____

TO BE VERIFIED BY CURRENT OR FORMER EMPLOYER

4. Employment information verification

Is the information provided in Section 3 above correct?

Employer Name	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Employer Address	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Supervisor's/HR Manager's Name	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Employer/HR Phone Number	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Beginning and Ending Dates of Employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Current Gross Income (if applicable)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Verification provided by:
Name: _____
Title: _____
Phone: (_____) _____

If No, please explain: _____
Verification obtained by:
 Phone Mail Fax



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RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of applicants for rental housing.
- The Landlord requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. **Please mail, fax, or email this form to the person listed in section 2 as soon as possible (within 24-48 hours)**

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Rental Applicant Reference Form. I hereby acknowledge that the Landlord can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (_____) _____

Signature _____ Date _____

TO BE COMPLETED BY LANDLORD

2. Person requesting the rental reference

Name of Landlord _____ Camellia Realty _____

Address _____ 2801 Waterman Blvd. _____ Unit # _____ 150

City _____ Fairfield _____ State _____ CA _____ Zip _____ 94534

Phone number (_____) _____ 707 422-9269 _____ Email _____ nancy@camelliarealty.net _____

Fax number (_____) _____ 707 422-5974 _____

3. Applicant's rental information

PRESENT LANDLORD

Name of rental community (if any) _____

Address of rental unit _____ Unit # _____

City _____ State _____ Zip _____

Name of Landlord _____

Phone number (_____) _____ Fax number (_____) _____

Move-in date: Month _____ Year _____ Move-out date: Month _____ Year _____ or current resident



TO BE COMPLETED BY FORMER OR CURRENT LANDLORD

CAUTION: Do not include information about non-payment of "COVID-19 rental debt," which is unpaid rent or any other unpaid financial obligation of the resident under the tenancy that came due between March 1, 2020, and September 30, 2021.

4. Rental Reference Information

Residency

- a. Did Applicant live at your property during the period indicated above?
b. If no, what were the dates of occupancy? From (month/year): To (month/year):

Rent Payments:

- c. What was the last effective monthly rent?
d. How many times during the past 12 months did Applicant pay the rent late?
e. Was any check from Applicant returned due to non-sufficient funds (NSF)?
f. Did you ever file for an unlawful detainer against Applicant for unpaid rent?
If yes, what was the result?

- g. Does Applicant owe any amount for delinquent rent?

Other Financial Obligations of Tenancy (i.e., utilities, parking fees, damage to the unit):

- h. How many times during the past 12 months did Applicant pay other financial obligations of tenancy late?
i. Was any check from Applicant for other financial obligations of tenancy returned due to non-sufficient funds (NSF)?
j. Did you ever file an unlawful detainer action (eviction) against Applicant for unpaid financial obligations of tenancy other than rent?
If yes, what was the result?

- l. Does Applicant owe any amount for other financial obligations of tenancy?

Other Three-Day Notices

- m. Did you ever serve a Three-Day Notice to Applicant other than for non-payment of rent or other financial obligations of the resident under the tenancy?
n. If yes, please explain:

Termination of Tenancy by Applicant

- o. If tenancy was terminated by Applicant, did Applicant provide notice for ending tenancy according to the terms of the rental agreement?

Information provided by: Name

Phone number () Email

Information obtained by: Phone Mail Email Fax



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TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Rental Applicant Reference Form. I hereby acknowledge that the Landlord can make copies of this executed page in order to obtain the information requested.

Name _____ Phone number (_____) _____
Signature _____ Date _____

TO BE COMPLETED BY LANDLORD

2. Person requesting the rental reference

Name of Landlord Camellia Realty
Address 2801 Waterman Blvd. Unit # 150
City Fairfield State CA Zip 94534
Phone number (707) 422-9269 Email nancy@camelliarealty.net
Fax number (707) 422-5974

3. Applicant's rental information

PREVIOUS LANDLORD

Name of rental community (if any) _____
Address of rental unit _____ Unit # _____
City _____ State _____ Zip _____
Name of Landlord _____
Phone number (_____) _____ Fax number (_____) _____
Move-in date: Month _____ Year _____ Move-out date: Month _____ Year _____ or current resident



TO BE COMPLETED BY FORMER OR CURRENT LANDLORD

CAUTION: Do not include information about non-payment of "COVID-19 rental debt," which is unpaid rent or any other unpaid financial obligation of the resident under the tenancy that came due between March 1, 2020, and September 30, 2021.

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Information provided by: Name

Phone number () Email

Information obtained by: Phone Mail Email Fax



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**CORONAVIRUS PROPERTY ENTRY
ADVISORY AND DECLARATION – VISITOR**

(C.A.R. Form PEAD-V, 7/13/20)

(A new declaration should be obtained from each visitor, each time they enter a property).
(May be used for more than one property visited on the date this form is signed, provided a copy is delivered to each Listing Broker/Property Manager.)

Property Address(es)

1. **RISKS OF EXPOSURE:** The Coronavirus (COVID-19) pandemic is a worldwide risk to human health. COVID-19 is highly contagious. While people of all ages are at risk of catching COVID-19, persons with compromised immune systems and older persons may be at particular risk.
2. **GOVERNMENT ORDERS:** In order to reduce the spread of COVID-19, elected representatives and health officials from the State of California, as well as many California cities and counties have issued "Stay Home" Orders and other mandates and recommendations (collectively, "COVID-19 Directives"), limiting activities that can be engaged in by businesses and members of the public. Some city and county orders are more restrictive than, and may take precedence over, Federal and State guidelines.
3. **VISITOR ADVISORY:** Visitors are advised that if you engage in any activities in violation of any COVID-19 Directives, you are acting against the advice of Broker. Brokers and agents (i) will comply with COVID-19 Directives, notwithstanding any Party's instructions and (ii) will obey all Fair Housing laws while pursuing safe COVID-19 practices. Nothing contained in this form shall be construed to allow an activity that is otherwise prohibited by any law. You are required to take all reasonable steps necessary to protect yourself and others.
4. **PURPOSE OF ENTRY:** The purpose of the entry is for either (i) viewing or inspecting a Property or performing an activity or providing services in furtherance of or to facilitate a real estate transaction or service, or (ii) allowing prospective purchasers or tenants to view or inspect the Property (Property may also be referred to as Premises in lease documents, and both carry the same meaning), making necessary or agreed repairs to the Property, or completing a pre-move-in or pre-move-out inspection of the Property, or other service in furtherance of a property management agreement.
5. **PROPERTY ENTRANT RULES:** Whether the person signing below is a prospective or actual buyer or tenant, real estate agent, or other person whose services facilitate the completion of a real estate transaction or lease/rental agreement or provide a property management or other service ("Signer"), Signer is voluntarily entering the Property. Signer agrees to take all reasonable and necessary precautions to protect Signer and others from the spread of COVID-19, including, but not limited to, the following ("Posted Rules of Entry"):
 - A. Following all Federal, State, and local laws and Stay at Home Orders, even though they may be changing rapidly;
 - B. Exercising care to protect yourself, and assessing your own risks, by considering your age, underlying health conditions, recent travel, possible exposure to COVID-19, doctor's recommendations, and local, State and Federal recommendations. You agree and understand that it is your responsibility to evaluate the risks and protect yourself;
 - C. Washing your hands with soap and water or using hand sanitizer, immediately upon entry and before touring or inspecting the Property. Remember to not touch your eyes, nose or mouth;
 - D. Wearing a protective face covering;
 - E. Practicing social distancing by keeping at least 6 feet between yourself and others. Do not gather in groups;
 - F. Avoiding touching knobs, faucets, toilets and toilet handles, light switches, garage door opener buttons, handles and pulls, alarm system controls, fan pulls, remotes, thermostats, switchboxes, gates and gate latches, window locks and sashes, pool coverings, counters, door and cabinet handles, sinks, and other such items, with the exception for trades or repair persons performing tasks requiring the touching of such items. If you believe it necessary to touch surfaces or items in the Property, consider the risks of doing so; and
6. **SIGNER ACKNOWLEDGMENTS AND AUTHORIZATIONS:**
 - A. No written materials or brochures describing, advertising, or marketing the Property will be available at the Property. Any such information needs to be obtained from broker or agent electronically;
 - B. A set of rules for agents and entrants will be posted at the entrance of the Property and are clearly visible and include pictograms "Posted Rules For Entry" (C.A.R. Document PRE);
 - C. Signer acknowledges that although others have been advised to clean and disinfect the Property before and after each showing, there is no guarantee that the cleaning removed any or all instances of the COVID-19 virus that may have been present;
 - D. Signer has been provided an electronic copy of, and agrees to the terms of, the Mandatory Government Showing Requirements, including Best Practices Guidelines and Prevention Plan (C.A.R. Document BPPP) or substantially equivalent document approved by Broker which has been provided to Visitor and the Posted Rules For Entry contained herein;
 - E. Signer can obtain online information about COVID-19 Directives from the California Departments of Public Health (CDPH) and Industrial Relations (Cal/OSHA) at the following locations: (i) <https://covid19.ca.gov/pdf/guidance-real-estate.pdf>; (ii) <https://covid19.ca.gov/pdf/checklist-real-estate.pdf>; and (iii) <https://www.dir.ca.gov/dosh/coronavirus/General-Industry.html>.
 - F. Signer authorizes Broker or agent to electronically deliver this form and any updates to it, to Seller and listing broker or agent.
7. **SIGNERS REPRESENTATIONS:**
 - A. You understand that accessing a property for any of the purposes above (i) may be dangerous or unsafe and (ii) could expose you or others to COVID-19. You are voluntarily accessing the property;
 - B. To the best of your knowledge, you are not currently afflicted with COVID-19;
 - C. To the best of your knowledge, you have not knowingly, within the last 14 days, been in contact with someone afflicted with COVID-19;
 - D. You are not experiencing a fever, or signs of respiratory illness such as cough, shortness of breath or difficulty breathing, or other COVID-19 symptoms;
 - E. You understand that persons may be afflicted with COVID-19 and: (i) not exhibit symptoms, (ii) not be aware that they are afflicted or (iii) may not voluntarily agree to disclose their condition.
 - F. You will inform Broker if, after the date this document is signed, there is a change in your health condition or knowledge that potentially puts others at risk or invalidates the representations made in this document.

CORONAVIRUS PROPERTY ENTRY ADVISORY AND DECLARATION – VISITOR (PEAD-V PAGE 1 OF 2)

8. **ACCOMPANYING MINORS:** Adult Signers acknowledge and agree that all Property entrant rules, Signer acknowledgments and Signer representations apply equally to any accompanying minors as they do to Signer. Signer is responsible for their care, safety, and conduct in the Property. Any accompanying minors shall be identified in paragraph 9.
9. **EXCEPTIONS TO REPRESENTATIONS AND ADDITIONAL TERMS:** _____
- _____
- _____

10. **AGREEMENT, DECLARATION AND ASSUMPTION OF RISK:** By signing below, you are declaring the foregoing is true, that you agree to take all recommended and reasonable actions to protect yourself and others from exposure to COVID-19, and that you **ASSUME THE RISK**, of entering the Property. You understand and agree that no one, including but not limited to real estate brokers and agents, can guarantee that you will not be exposed to or contract COVID-19.

By signing below, you, the Signer, the person entering the Property, acknowledge that you have read, understand, voluntarily agree to the foregoing and will adhere to the Posted Rules For Entry, and have received a copy of this Coronavirus Property Entry Advisory and Declaration – Visitor.

 (print name) (signature) Date _____
 Person entering Property: Buyer, Tenant/Lessee, Broker/Agent (DRE# _____), Other Entrant

 (print name) (signature) Date _____
 Person entering Property: Buyer, Tenant/Lessee, Broker/Agent (DRE# _____), Other Entrant

 (print name) (signature) Date _____
 Person entering Property: Buyer, Tenant/Lessee, Broker/Agent (DRE# _____), Other Entrant

(For record keeping purposes only)

I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THIS SIGNED PEAD-V FORM. (The initials below are not required but can be used as evidence that the initialing party has received the completed form.)

Broker/Agent for Buyer/Tenant/Lessee (____)(____)

Broker/Agent for Seller/Landlord/Lessor (____)(____)

Seller/Landlord/Lessor (____)(____)

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PEAD-V 7/13/20 (PAGE 2 OF 2)

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