

Unit # _____ App # _____
 Rent _____ Paid / Unpaid _____
 Deposit _____ CREDIT CASH CHECK _____
 (Qualified)

RENTAL APPLICATION

APPLICANT	NAME (APPLICANT)				
	DATE OF BIRTH	SOC. SECURITY #		DRIVER'S LICENSE # / STATE	
	PRESENT STREET ADDRESS		CITY	STATE ZIP	
	FROM	/ /	TO	/ /	
	LANDLORD NAME			Phone	
	LANDLORD STREET ADDRESS (OR APARTMENT NAME)		CITY	STATE ZIP	
	FORMER LANDLORD NAME			Phone	
	LANDLORD STREET ADDRESS (OR APARTMENT NAME)		CITY	STATE ZIP	
	FROM	/ /	TO	/ /	
	OTHER STATE OR COUNTRIES YOU HAVE LIVED IN THE PAST 5 YEARS				
	PRESENT EMPLOYER				
	STREET ADDRESS		CITY	STATE ZIP	
	PHONE #	POSITION		HOW LONG (DATE HIRED)	
	GROSS PAY	OTHER INCOME	SOURCE		
	PREVIOUS EMPLOYER				
STREET ADDRESS		CITY	STATE ZIP		
PHONE #	POSITION		HOW LONG (DATE HIRED)		
REFERENCES	RELATIVE / PARENT		ADDRESS PHONE		
	PERSONAL REFERENCE		ADDRESS PHONE		
	HAVE YOU EVER BEEN EVICTED? YES / NO		DATE / /		
	HAVE YOU OR ANY OTHER PERSON WHO WILL BE OCCUPYING THE UNIT EVER BEEN CONVICTED OF, PLED GUILTY OR NO CONTEST TO ANY FELONY OR MISDEMEANOR		WHERE WHEN / /		
OTHER	OTHER OCCUPANTS:	AGE OR DATE OF BIRTH	AUTOMOBILES	LICENSE #	PETS - Subject to approval by management Number and Type _____
					DO YOU INTEND TO USE:
					Waterbed Aquarium
					Musical instrument _____
			PARKING SPACES NEEDED		Do you have renters insurance? YES / NO
Why are you vacating your present place of residence? _____					
Have you given legal notice where you live? YES / NO _____ How did you hear about our property? _____					
DISCLAIMER	I certify that the above information is correct and complete and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I/We understand that giving incomplete or false information is grounds for rejection of this application. If any information supplied on this application is later found to be false, this is grounds for termination of tenancy.				
	Owner/Agent has charged a screening charge as set forth above. Landlord may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the applicant's credit, income, employment, rental history, criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 606(b) of the Fair Credit Reporting Act, and written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation. The name and address of the screening company is Pacific Screening, Inc. P.O. Box 25582 Portland, OR 97298				
OFFICE	If the Application is approved, applicants will have 24 hours from the time of notification to either execute a rental agreement and make all deposits required thereunder or make a deposit to hold the unit and execute a deposit receipt which will provide for the forfeiture of the deposit if applicants fail to occupy the unit. If applicants fail to timely take steps required above, they will be deemed to have refused the unit and the next application for the unit will be processed.				
	Good Faith Estimate:				
	Approximate number of units currently available, or will in the foreseeable future be available, of the size and in the area requested by Applicant: _____ units. Approximate number of applications previously accepted and currently under consideration for those units: _____ applications. If the blanks above are not filled in, then there is at least one unit available and there are no applications ahead of yours currently under consideration.				

Applicants Signature
 X _____

PICTURE I.D. VERIFIED _____