RENTAL APPLICATION to be completed by each ADULT APPLICANT

Verified Driver's License or State I.D.				ULL REPORT	CRED	CREDIT PLUS		FAST FACTS	
☐ Yes	□ No								
□Co-Signer	□ W/ Current Te			nt Applicatio	on Received	Received:			EQUAL HOUSING
									- OPPORTUNITY
MANAGEMENT COMPANY COMMUNIT			IUNITY NA	AME PRO	HONE HOW DID		YOU HEAR ABOUT US?		
MOVE-IN DATE UNIT # MONTHLY R			HLY RENT	7 \$	LEASE TO DESIRED			OPERTY CONTACT	
APPLICANT	INFOR	MAT	ION						
LAST NAME	FIRST		MII	DDLE		DOB		SOCIAL SECURI	TY#
EMAIL ADDRESS	CELL TELEF			IE NUMBER	CONTACT TELEPHONE NUMBER				
YOUR CURR	ENT RE	ESID	ENCE	Ξ					
STREET ADDRESS			APT#			CITY		STATE	ZIP
VEC A NO A			RENT OWN	MOVE-IN DATE: MOVE-OUT DATE:	MONTHLY RENT \$		YOUR EMAIL		
LANDLORD/MTG. COMPA	ANY	CITY		STATE ZIP	LANDLORD	DAY PHONE		LANDLORD EV	ENING PHONE
ROOMMATE(S) NAME(S)									
APPLICANT	INFOR	MAT	TION						
REASON FOR VACATING:				HOW DID YOU HEAR ABOUT US			UT US?		
YOUR PREV	IOUS RI	ESIL	ENCI	E					
STREET ADDRESS			APT#			CITY		STATE	ZIP
DID YOU GIVE LEGAL NOTICE TO VACATE? YES □ NO □		RENT □ OWN □	MOVE-IN DATE: MOVE-OUT DATE:		MONTHLY RENT \$		TELEPHONE		
LANDLORD/MTG. COMPA	ANY	CITY		STATE ZIP	LANDLORD	DAY PHONE		LANDLORD EV	ENING PHONE
REASON FOR VACATING:					LIST ALL RO	OMMATES:			
EMPLOYME	NT / IN	CO	ME						
CURRENT EMPLOYER		POSI	TTION	TELEPHONE		SUPERVISO	R'S NAME	SALARY / MONTH	DATE OF HIRE
PREVIOUS EMPLOYER		POSI	TION	TELEPHONE		SUPERVISO	R'S NAME	SALARY / MONTH	FROM: TO:
ADDITIONAL SOURCES O	F MONTHLY IN	COME (List all income	to be included for qualific	cation):	SOURCE:		TELEPHONE	
BRANCE BRANCE		NCH	TELEPHONE		CHECKING ACCT #		SAVINGS ACCT #		
EMERGENC	Υ CON	 ГА <i>С</i> ′	Г						
NAME	1 00141		ATIONSHIP	ADDRESS				TELEPHONE	

ADDITIONAL INFORMATION										
LIST AI	LL VEHIC	LES TO	BE PAR	KED ON SIT	OTHER OCCUPANTS					
MAKE MODEL YEAR COLOR				LICENSE#	STATE	OCCI	D.O.B.			
						TYPE AND SIZE OF PETS:				
HAVE YOU ESTABLISHED RETAIL CREDIT? YES NO \(\Boxed{1} \)										
WILL YOU BE MOVING IN ANY OF THE FOLLOWING ITEM WATERBED □ AQUARIUM □ MUSICAL INSTRUMEN]	DO YOU HAVE F	RENTERS INSURANCE? YES Policy #:	NO 🗆		
IF YES, PROVIDE DATE(S) AND LOCATION(S): HAVE YOU EVER BEEN EVICTED? YES \(\sigma \) NO \(\sigma \)										
HAVE YOU OR ANY PERSON WHO WILL OCCUPY THE UNIT EVER BEEN CONVICTED, PLEAD GUILTY, NO-CONTEST OR HAVE CURRENT PENDING CHARGES TO ANY FELONY OR MISDEMEANOR? YES □ NO□ DESCRIBE OFFENSE: DATE OF OFFENSE:										
		ESCRIBE OF		E UNIT A DECIST	'EDED S	EV OEEENDEDS	DATE OF OFFENSE:			
ARE YOU OR ANY PERSON WHO WILL OCCUPY THE UNIT A REGISTERED SEX OFFENDER? YES □ NO □ IF YES, DATE AND LOCATION OF REGISTRATION:										
						SE PRIOR TO EXECUTION	OF THE RENTAL AGREEMENT			
	RENT	ZOWING IN	TORMITTO	TV 13 30 DJECT 10	DEPO		FEES			
THE FOLLOWING A		AMOUNTS. TH					TELS			
AMOUNT CHARGES SCREENING RESUL				SECURITY DEPOSIT			LATE RENT PAYMENT FEE \$			
UNIT RENT	\$			SECURITY DEPOSIT I (DEPENDS ON SCREI		SULTS AND UNIT SIZE)	LEASE BREAK FEE (NOT TO EXCEED 1.5 X RENT)	\$		
-	\$			PET		\$	N.E.S. CHECK FEE OF \$25 + BANK CHARGES			
	\$			GARAGE / STORAGE		\$ \$	SMOKE ALARM / CARBON MONOXIDE ALARM TAMPERING FEE \$			
	\$			OTHEROTHER			LOST KEY, ACCESS CARD FEE \$			
				OTHER_		\$	ON-COMPLIANCE FEE* 1. LATE PAYMENT OF UTILITY \$			
· · · · · · · · · · · · · · · · · · ·						2. FAILURE TO CLEAN PET WASTE 3. FAILURE TO CLEAN GARBAGE/RUBBISH	\$ \$			
APPLICANT'S INITIALS			APPLICANT SCREI	ENING (CHARGE \$	4. PARKING VIOLATIONS OR IMPROPER USE OF VEHICLES * NOT TO EXCEED \$50 PER NON-COMPLIANCE				
GOOD FAITH ESTIMATE Approximate number of units currently available, or which will in the forseable future be available, of the size and in the area requested by applicant: unit(s). Approximate number of applications previously accepted and currently under consideration for those units: application(s). 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.										
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 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. Applicant screening entails the checking of the applicant's credit, rental history, employment history, public records and other criteria for residency. The applicant has the right to dispute the accuracy of any information provided to the owner/agent by the screening service or credit reporting agency. Applicant's copy of this signed application and / or email verification shall be the receipt for the screening charge. The screening service is Pacific Screening Inc., P.O. Box 25582, Portland, OR 97298 (503) 297-1941. If the applicant is approved, applicants will have hours from the time of notification to either execute a rental agreement and make all deposits required thereunder or make a deposit to execute a rental agreement which will provide for the forfeiture of the deposit if applicants fail to execute the rental agreement. If applicants fail to timely take the steps required above, they will be deemed to have refused the unit and the next application for the unit will be processed. Owner / Agent shall have no liability to applicant until such time as a rental agreement is signed by both parties. Applicant acknowledges receipt of a copy of the Criteria for Residency. The information contained in this application is true and complete.										
Signed	Signed				(Ap	oplicant)	Dated			
Signed					(Ag	gent for Owner)	Dated			