(If requested ONLINE	nlagge indicate the	File(a) #.			
tti reduested ONLINE	biease indicate the	e rue(s) #:	-	-	

## **RENTAL APPLICATION**

Important: All information must be completed in its entirety. Please print clearly and legibly to ensure accurate and timely processing.

Unit Applying For:	Landlord or P	Landlord or Property Manager Name:		
Applicant #1: Last Name	First Name	Middle Na	nme	
Any other name(s) used:	E-mail	Address:		
Work Phone Number:	Phone Number: Home Phone Number: Cell Phone Number:			
SS#: I	Date of Birth:	DL#:		
Applicant #2: Last Name	First Name	M:JJIo No		
		Middle Na		
Any other name(s) used:	E-mail	Address:		
Work Phone Number:	_ Home Phone Number:	Cell Phone Number:		
SS#: I	Date of Birth:	DL#:		
Current Address:	City:	State: _	Zip:	
Landlord's Name:	Landlord	's Phone Number: () _	\$:	
Own Rent Move in date:	Notice given:	Reason for Leavin	ng:	
Previous Address:	City:	State:	Zip:	
Landlord's Name:	Landlord	's Phone Number: () _	\$:	
Own Rent Move in date:	Move out date:	Reason for Leav	ving:	
Applicant #1 Employer:		Email:		
Address:	City:	State:	Zip:	
Human Resources: Phone Number				
Position:	Hire date: /	/ Salary: \$	Hr. / Mo. / Yr.	

Applicant #2 Emplo	oyer:		Email:	
Address:		City:	State:	Zip:
<b>Human Resources:</b>	Phone Number: (		Fax Number: () _	
Position:		Hire date:/	_/ Salary: \$	Hr. / Mo. / Yr.
	9	GENERAL INFORMATIO	<u>DN</u>	
Automobile 1:	Year	Make/Model	License #	
Automobile 2:	Year	Make/Model	License #	
Checking Account:	Bank Name		Account #	
Savings Account:	Bank Name		Account #	
Personal References	s:			
2				
<b>Additional Occupa</b>	nts Information:			
Have you ever been	a party to an eviction	n?		
Have you ever filed	Bankruptcy?	Yes No		
Do you have any Cr	redit Cards?	Yes 🗌 No Total Balan	ce Due: \$	
Do you have any Lo	oans?	☐ No Total Balance D	ue: \$	
Do you have any pe	ts? (Please indicate ty	ype and size)		
Will you have a wat	er bed?  Yes	□ No		
PLEASE PROVIDE	THE BEST PHONE N	UMBER TO REACH YOU: (		

## **AUTHORIZATION**

Management Company") to obtain a "consumer r	ize (the "Landlord or Property eport" (a background report) about me. The background cks is Tenant Screening Center, Inc., 6570 Oakmont Drive, 1-800-523-2381, www.tsci.com.					
personal characteristics, mode of living, and credit	in information concerning my character, general reputation, at history/standing. The types of information that may be curity number verification, criminal records check, verification employment, and credit reports.					
Selection criteria that may result in denial of my rental application includes: criminal history; previous rental history; credit history; or failure to provide accurate or complete information on the application form.						
I agree the Landlord or Property Management Company may rely on this form to obtain background reports throughout my tenancy without asking me for my authorization again as allowed by law. I also agree that a copy of this form is valid like the signed original. I certify that all of the personal information I provided is true and correct.						
selection criteria. The tenant selection criteria history, current income, and rental history. If	u have had the opportunity to review the landlord's tenant may include factors such as criminal history, credit you do not meet the selection criteria, or if you provide plication may be rejected and your application fee will not					
California Applicants Only: Check this box if yo	u would like a free copy of your background check report:					
Washington State applicants: You also have the summary of your rights and remedies under the W	right to request from the consumer reporting agency a written Vashington Fair Credit Reporting Act.					
Print Name						
Applicant Signature	Date (Month/Day/Year)					
Print Name						
Applicant Signature	Date (Month/Day/Year)					

REV09/18