



RENTAL APPLICATION

To be completed by each adult applicant

ALL UNITS SUBJECT TO AVAILABILITY



| | | | | |
|---|---------------------------|-----------------------------|------------------------|---|
| PROPERTY NAME / NUMBER | | UNIT NUMBER / ADDRESS | | |
| DATE | TIME | DATE UNIT WANTED | UNIT RENT | SCREENING CHARGE \$ |
| OWNER / AGENT | | STREET ADDRESS | | PHONE |
| NAME (APPLICANT) | | | | |
| DATE OF BIRTH | | SOC. SECURITY # | | DRIVER'S LICENSE # / STATE |
| PRESENT STREET ADDRESS | | CITY | | STATE ZIP |
| FROM | TO | | | PHONE () |
| LANDLORD NAME | | | | PHONE () |
| LANDLORD STREET ADDRESS (OR APARTMENT NAME) | | CITY | | STATE ZIP |
| FORMER STREET ADDRESS | | CITY | | STATE ZIP |
| FROM | TO | FORMER LANDLORD | | PHONE () |
| FORMER LANDLORD STREET ADDRESS (OR APARTMENT NAME) | | CITY | | STATE ZIP |
| OTHER STATES AND COUNTIES 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 (2ND JOB) \$ | SOURCE | | |
| PREVIOUS EMPLOYER | | | | |
| STREET ADDRESS | | CITY | | STATE ZIP |
| PHONE () | | POSITION | HOW LONG? (DATE HIRED) | |
| BANK (Checking) | | BRANCH | PHONE | ACCOUNT NUMBER |
| BANK (Savings) | | BRANCH | PHONE | ACCOUNT NUMBER |
| HAVE YOU ESTABLISHED RETAIL CREDIT? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | |
| LIST ALL OTHER OUTSTANDING DEBTS: (Attach additional sheet if necessary) | | | BALANCE \$ | MONTHLY PAYMENT \$ |
| RELATIVE / PARENT | | ADDRESS | | PHONE () |
| PERSONAL REFERENCE | | ADDRESS | | PHONE () |
| HAVE YOU EVER BEEN EVICTED? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> NO WHO WHERE WHEN | | | | |
| OTHER OCCUPANTS: NAME | | AGE OR DATE OF BIRTH | AUTOMOBILES | LICENSE NO. |
| | | | | |
| | | | OTHER VEHICLES | |
| | | | PARKING SPACES NEEDED | |
| | | | | PETS - Subject to approval by management Number & Type _____ |
| | | | | DO YOU INTEND TO USE: <input type="checkbox"/> Waterbed <input type="checkbox"/> Aquarium <input type="checkbox"/> Musical Instrument _____ |
| | | | | DO YOU HAVE RENTER'S INSURANCE? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Why are you vacating your present place of residence? _____ | | | | |
| Have you given legal notice where you now live? <input type="checkbox"/> Yes <input type="checkbox"/> No How did you hear about our property? _____ | | | | |
| 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 a 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 or credit reporting agency is: _____ | | | | |
| If the application 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 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 the 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. | | | | |
| APPLICANT X _____ | | PICTURE I.D. VERIFIED _____ | | |
| MANAGER X _____ | | | | |

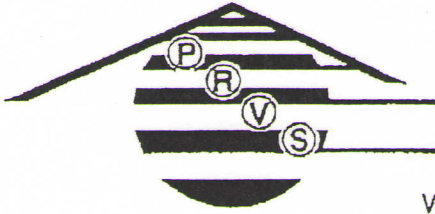
APPLICANT

REFERENCES

OTHER

APPROVAL

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PROSPECTIVE RENTERS VERIFICATION SERVICE

We do the checking for you...

... fast, courteous service, reports called or faxed back

PO Box 69 • Eagle Creek, OR 97022

WA (360) 573-6974, fax 573-6975 • OR (503) 655-0888, fax 655-0900

CREDIT OR SUMMARY REPORT FORM

Fill out one form for each adult applicant (18 years or older).

Please print clearly above each line.

| | | | |
|---------------------|----------------------|--|--|
| Customer Number | <u>JOE ROBERTSON</u> | Type of Report Requested | |
| Report Requested By | <u>JOE ROBERTSON</u> | <input type="checkbox"/> Credit Report | <input checked="" type="checkbox"/> Summary Report |
| Complex or Company | _____ | <input type="checkbox"/> Beacon Credit | <input type="checkbox"/> Beacon Summary |
| | | <input type="checkbox"/> Employment Report | <input type="checkbox"/> Employment Summary |
| | | <input type="checkbox"/> Mini Summary Report (No Credit) | |

Applicant Last Name _____ First _____ Middle _____ Suffix _____

Current Address _____

City _____ State _____ Zip _____

Social Security Number _____ Date of Birth _____

The tenant screening or consumer credit report may entail, credit or financial history, public records search, calling current, former landlords and employers, and verifying any information on the application.

CORRECT INFORMATION - Applicant represents that all of the above statements are true and complete. Applicant acknowledges that giving false information herein or giving an incomplete application may constitute grounds for rejection of this application, termination of right of occupancy, and / or forfeiture of deposits and may constitute a criminal offense under the laws of this state. By signing this application you authorize the screening process and acknowledge a copy of this notice. Applicant acquires no rights in the rental unit until a Holding or Security Deposit is paid when requested by the Landlord or Manager.

Signature of Applicant _____

Date _____

Signature of Landlord or Manager _____

Date _____