



# APPLICATION TO RENT

## 55+ COMMUNITY

**PLEASE PRINT CLEARLY – ILLEGIBLE INFORMATION CAUSES DELAYS IN PROCESSING YOUR APPLICATION**

Complex/Owner Name: \_\_\_\_\_ Rental Unit #: \_\_\_\_\_ Rent: \$ \_\_\_\_\_

<b>APPLICANT INFORMATION</b>	<b>EACH APPLICANT Must Fill Out A Separate Application.</b> <input type="checkbox"/> Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Co-Applicant <input type="checkbox"/> Guarantor
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Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Last First Middle Maiden

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Have you gone by any other names?   Yes   No   Please List: \_\_\_\_\_

Other persons to occupy the property: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Automobile Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License Number: \_\_\_\_\_

Contact in Case of emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

<b>RESIDENCE HISTORY</b>	<b>IT IS THE APPLICANTS RESPONSIBILITY TO ENSURE ALL INFORMATION IS CORRECT AND COMPLETE. MISSING OR INCOMPLETE INFORMATION IS GROUNDS FOR REJECTION.</b>
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CURRENT ADDRESS	PREVIOUS ADDRESS	FORMER ADDRESS
Number _____ Street _____ Name _____ Apt# _____ City _____ State _____ Zip _____ Rent \$ _____ Mortgage \$ _____ Moved in: _____ Out: _____ Landlord: _____ LL Phone: ( _____ ) _____ Reason for Leaving: _____	Number _____ Street _____ Name _____ Apt# _____ City _____ State _____ Zip _____ Rent \$ _____ Mortgage \$ _____ Moved in: _____ Out: _____ Landlord: _____ LL Phone: ( _____ ) _____ Reason for Leaving: _____	Number _____ Street _____ Name _____ Apt# _____ City _____ State _____ Zip _____ Rent \$ _____ Mortgage \$ _____ Moved in: _____ Out: _____ Landlord: _____ LL Phone: ( _____ ) _____ Reason for Leaving: _____

<b>EMPLOYMENT HISTORY</b>	<b>INFORMATION ON EMPLOYMENT HISTORIES MUST BE COMPLETE &amp; ACCURATE IN ORDER TO VERIFY INCOME. PLEASE LIST PHONE NUMBERS OF PERSON TO VERIFY EMPLOYMENT.</b>
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PRESENT EMPLOYER	PREVIOUS EMPLOYER	BANKING INFORMATION
Name of Company or Employer _____ Phone: ( _____ ) _____ Position: _____ Monthly Earnings: _____ Start Date: _____	Name of Company or Employer _____ Phone: ( _____ ) _____ Position: _____ Monthly Earnings: _____ Start Date: _____	Bank _____ Branch: _____ Phone: ( _____ ) _____ Checking Acct. # _____ Savings Acct. # _____

Other Monthly Income \$ \_\_\_\_\_ Source \_\_\_\_\_ How to Verify: \_\_\_\_\_

<b>MISCELLANEOUS INFORMATION</b>	Do you have any pets or do you intend to get any pets? _____ If yes, what kind? _____ Have you or any other occupant ever been convicted of a criminal offense? Yes _____ No _____ Have you or any other occupant ever been evicted? Yes _____ No _____ Are you or any other occupant a registered Sex Offender? Yes _____ No _____ Have you filed bankruptcy in the last 10 Years? _____ Reason: _____
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I understand that according to state and federal laws I have the right to dispute the accuracy of information provided by owner/landlord/agent disclosed above, and upon written request, the right to a complete and accurate disclosure of the nature and scope of the investigation and/or a written summary of my rights under the FCRA & WA Fair Credit Reporting Act. I certify that to the best of my knowledge all statements made herein are true and correct. I am aware that false, fraudulent or misleading information disclosed above may be grounds for denial of tenancy or subsequent eviction. I am also aware that an incomplete application causes a delay in processing and may result in denial of residency. I understand that a **NON-REFUNDABLE APPLICATION PROCESSING FEE of \$40.00** will be charged for processing each application. I hereby grant permission to the owner/landlord/agent to obtain credit reports, public record information, verification of rental history, credit history, employment history & any necessary information. An investigative report will be provided to the rental owner or agent.

Date: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_  
 Manager: \_\_\_\_\_



DISCLOSURE AND AUTHORIZATION REGARDING PROCUREMENT OF BACKGROUND REPORTS

It is recognized and understood that the Fair Credit Reporting Act provides that anyone "who knowingly and willfully obtains information on a customer from a consumer reporting agency under false pretenses" shall be fined not more than \$2,500 or imprisoned not more than a year, or both.

In connection with my application for EMPLOYMENT (including contract for services), I understand that investigative background inquiries are to be mad on me which may include criminal convictions, motor vehicle, and other reports. These reports may include information as to my character, work habits, performance, education and experience along with reasons for termination of employment from previous employers. Further, I understand that you will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences. *If I include a current employer for verification, I may jeopardize my position within that company.* I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from any liability and responsibility for doing so. I hereby consent to obtaining the above information from BACKGROUND SOURCE INTL and/or any of their licensed agents. This authorization and consent shall be valid in original, fax or copy form. I further authorize ongoing procurement of the above mentioned reports at any time during my employment (or contract).

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please PRINT clearly:** Position applied for: \_\_\_\_\_

Name: \_\_\_\_\_ Maiden/AKA: \_\_\_\_\_  
                    First                                    Middle                                    Last

Soc. Sec. #: \_\_\_\_\_ \*Sex: \_\_\_\_\_ \*Race: \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ How long: \_\_\_\_\_ to \_\_\_\_\_

Previous Address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ How long: \_\_\_\_\_ to \_\_\_\_\_

**Motor Vehicle Report** Fax to: (208) 769-7282

Name as it appears: \_\_\_\_\_ License #: \_\_\_\_\_ State held: \_\_\_\_\_

\*Responses to these are completely voluntary. You need not respond to have your application considered. However, without this information, we may be unable to distinguish you from another in the event we discover adverse information during our background investigation. 03/06/01