



UNIVERSITY PARK TOWNHOMES APPLICATION FOR TENANCY

**FIFTY DOLLAR (\$50.00) EACH NONREFUNDABLE APPLICATION
FEE**

**SECURITY DEPOSIT AND 1ST MONTHS RENT MUST BE PAID BY
CASH OR CHECK**

Application is hereby made to lease the premises at _____ Amherst Drive Powell's Point _____ Unit # _____
Beginning on the _____ day of _____, _____ Number to occupy unit _____

APPLICANT INFORMATION

Each adult on the lease, other than spouse, must complete a separate application

APPLICANT

SPOUSE

<p>Name _____ <small>Last First Middle</small> Soc. # _____ Date of birth _____ Address _____ <small>Street City</small> State _____ Zip _____ Phone _____ Email _____ Current Landlord _____ Landlords phone # _____ Landlords fax # _____ How long at above address? _____ Monthly rent \$ _____ Previous address _____ <small>Street</small> City _____ State _____ Zip _____ Landlords phone # _____ How long at above address? _____ Monthly Rent \$ _____</p>	<p>Name _____ <small>Last First Middle</small> Soc. # _____ Date of birth _____ Address _____ <small>Street City</small> State _____ Zip _____ Phone _____ Email _____ Current Landlord _____ Landlords phone # _____ Landlords fax # _____ How long at above address? _____ Monthly rent \$ _____ Previous address _____ <small>Street</small> City _____ State _____ Zip _____ Landlords phone # _____ How long at above address? _____ Monthly Rent \$ _____</p>
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EMPLOYMENT INFORMATION

APPLICANT

SPOUSE

<p>Employer _____ Address _____ Occupation _____ How long employed? _____ Supervisor _____ Supervisors phone # _____ Salary \$ _____ Week/Month/Year Additional Income * \$ _____ Previous Employer _____ How long employed? _____ Supervisors phone # _____</p>	<p>Employer _____ Address _____ Occupation _____ How long employed? _____ Supervisor _____ Supervisors phone # _____ Salary \$ _____ Week/Month/Year Additional Income * \$ _____ Previous Employer _____ How long employed? _____ Supervisors phone # _____</p>
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IF MILITARY, COMPLETE FOLLOWING:

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Duty Station: _____
 Rank/Rate: _____ End Current Enlist _____
 Commanding Officer: _____
 Phone: _____
 Home of Record _____

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 Rank/Rate: _____ End Current Enlist _____
 Commanding Officer: _____
 Phone: _____
 Home of Record _____

*Applicant need not disclose alimony, child support or separate maintenance income or it's Source, unless applicant wishes it to be considered for the purpose of the Application for Tanancy.

Do you have pets _____

OTHER OCCUPANTS
(Please list full name of all other occupants)

1. Relationship _____	Date of Birth _____
2. Relationship _____	Date of Birth _____
3. Relationship _____	Date of Birth _____
4. Relationship _____	Date of Birth _____

REFERENCES

1) _____

2) _____

CREDIT REFERENCES

1. _____

2. _____

ADDITIONAL INFORMATION

LIST ALL VEHICLES TO BE PARKED ON SITE

MAKE	MODEL	YEAR	COLOR	LICENSE#	STATE

OTHER OCCUPANTS

OCCUPANT NAME	DOB

HAVE YOU ESTABLISHED STABLE CREDIT? YES NO

TYPE AND SIZE OF PETS: _____

WILL YOU BE MOVING IN ANY OF THE FOLLOWING ITEMS?
 WATERBED AQUARIUM MUSICAL INSTRUMENT

DO YOU HAVE RENTERS INSURANCE? YES NO
 Carrier: _____ Policy #: _____

HAVE YOU EVER BEEN EVICTED, OR ARE YOU CURRENTLY SUBJECT TO A PENDING EVICTION CASE? IF YES, PROVIDE DATE(S) AND LOCATION(S):
 YES NO

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? DISCRIM OFFENSE: _____ DATE OF OFFENSE: _____
 YES NO

ARE YOU OR ANY PERSON WHO WILL OCCUPY THE UNIT A REGISTERED SEX OFFENDER? IF YES, DATE AND LOCATION OF REGISTRATION:
 YES NO

THE FOLLOWING INFORMATION IS SUBJECT TO CHANGE PRIOR TO EXECUTION OF THE RENTAL AGREEMENT

RENT	DEPOSITS	INSURANCE
<p>THE FOLLOWING ARE MAXIMUM AMOUNTS. THE ACTUAL AMOUNT CHARGED WILL DEPEND ON UNIT SIZE, SCREENING RESULTS, AND OTHER FACTORS.</p> <p>UNIT RENT: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>SECURITY DEPOSIT MINIMUM: _____</p> <p>SECURITY DEPOSIT MAXIMUM (DEPENDS ON SCREENING RESULTS AND UNIT SIZE): _____</p> <p>OTHER: _____</p> <p>OTHER: _____</p> <p>OTHER: _____</p> <p>OTHER: _____</p> <p>OTHER: _____</p>	<p><input checked="" type="checkbox"/> IF CHECKED, INSURANCE WILL BE REQUIRED \$50,000.</p> <p><input type="checkbox"/> IF CHECKED, INSURANCE WILL NOT BE REQUIRED. MINIMUM INSURANCE AMOUNT \$500,000 (\$100,000 IF LEFT BLANK)</p>
APPLICANT'S INITIALS: _____	APPLICANT SCREENING CHARGE: _____	

GOOD FAITH ESTIMATE
 Approximate number of units currently available, or which will in the foreseeable future be available, of the size and in the area requested by applicant: NA unit(s).
 Approximate number of applications previously accepted and currently under consideration for those units: NA 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 NA 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 (WA's deposit for occupancy) 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. WA Applicants: In the event of a denial or other adverse action, you have a right to obtain a free copy of the consumer report from the screening company or credit reporting agency.

Signed _____ (Applicant) Dated _____
 Signed _____ (Agent for Owner) Dated _____

**Documents you must have when
turning in the rental application.**

1) Application Fee Fifty (\$50.00) dollars for each person. This is

A NONREFUNDABLE APPLICATION FEE

2) Driver License or ID

3) Social Security Card

4) Current Paystubs