

IN THE EVENT OF CO-TENANTS
OTHER THAN SPOUSE, USE
SEPARATE FORMS FOR EACH APPLICANT.

APPLICATION TO RENT

MANAGEMENT COMPANY	APARTMENT COMMUNITY	COMMUNITY CONTACT	COMMUNITY TELEPHONE	FAX

[] 1. APPLICANT [] 2. APPLICANT [] ROOMATE [] COSIGNER [] EMPLOYMENT

Applicant's Last Name	First	Middle	Soc. Sec. #	Driver's License and State	Birthdate
Applicant's Last Name	First	Middle	Soc. Sec. #	Driver's License and State	Birthdate
Other persons to occupy rental property.	1	Full Name RELATIONSHIP DOB		3	Full Name RELATIONSHIP DOB
	2	Full Name RELATIONSHIP DOB		Do you own a waterbed?	
Type and size of pets? (Keeping a pet requires a deposit and owner's consent)					

PART 1 RESIDENCE HISTORY

Applicant's Present Address	City	State	Zip	How Long?	[] Own	Phone ()	Monthly Pymt \$	
Name of Present Landlord	[] Mortgage Co.	[] Apartment Community	[] Other	City	State	Zip	Landlord Day Phone ()	Landlord Night Phone ()

PART 2 PREVIOUS RESIDENCE HISTORY

Applicant's Previous Address	City	State	Zip	How Long?	[] Own	Phone ()	Monthly Pymt \$	
Name of Previous Landlord	[] Mortgage Co.	[] Apartment Community	[] Other	City	State	Zip	Landlord Day Phone ()	Landlord Night Phone ()
Spouse's Previous Address	City	State	Zip	How Long?	[] Own	Phone ()	Monthly Pymt \$	
Name of Previous Landlord	[] Mortgage Co.	[] Apartment Community	[] Other	City	State	Zip	Landlord Day Phone ()	Landlord Night Phone ()

PART 3 EMPLOYMENT HISTORY

Applicant Employed By	Department	Supervisor's Name	How Long?
Address	City State Zip	Phone () Position	Monthly Salary \$
Applicant's Previous Employment	Department	Supervisor's Name/Co.	How Long?
Address	City State Zip	Phone () Position	Monthly Salary \$
Spouse Employed By	Department	Supervisor's Name/Co.	How Long?
Address	City State Zip	Phone () Position	Monthly Salary \$
ADDITIONAL INCOME Additional Income such as child support, alimony or separate maintenance need not be disclosed unless such additional income is to be included for qualification hereunder. Amount of \$ _____ per _____ Source _____			

PART 4 CREDIT & LOAN REFERENCES

Auto #1 (Year, make, model, color)	License Plate	State	Payment made to	Monthly Payment \$
Auto #2 (Year, make, model, color)	License Plate	State	Payment made to	Monthly Payment \$
Loans	Account #	Address	Total Debt	Monthly Payment \$
Charge Accounts & Cash	Account #	Address	Total Debt	Monthly Payment \$
Bank or Savings & Loan	Account #	Address	Checking Account #	

PART 5 IMPORTANT INFORMATION

Name of Applicant's Nearest Relative	Phone ()	Address	City	State	Zip	Relationship
Name of Spouse's Nearest Relative	Phone ()	Address	City	State	Zip	Relationship
Emergency Contact	Phone ()	Address	City	State	Zip	Relationship
Personal Reference	Phone ()	Address	City	State	Zip	Relationship

HAVE YOU EVER BEEN ASKED TO VACATE? [] YES [] NO CHARGED/CONVICTED OF CRIMINAL OFFENSE [] YES [] NO

HAVE EVER LEFT OWING A LANDLORD MONEY? [] YES [] NO DO YOU SMOKE TOBACCO? [] YES [] NO

HOW DID YOU HEAR ABOUT US? EMAIL ADDRESS: _____

I understand that I acquire no rights in an apartment until I sign this agreement and submit a holding fee in the amount of \$ _____. Upon approval of tenancy and the signing of an apartment rental agreement, this fee will be credited against my deposit and/or my first month's rent. In consideration for landlord holding said apartment at _____, I hereby waive all rights to the return of said holding fee and said fee shall be retained as liquidated damages in the event I do not choose to enter into the agreement applied for herein. In the event said application for tenancy is not accepted, holding fee shall be returned to applicant.

NON-REFUNDABLE APPLICATION FEE \$ _____

Pursuant to State and Federal Fair Credit Reporting Acts, this is to inform you that an investigation involving the statements made on your rental application at the above-mentioned apartment complex, as well as inquiries regarding your character, general reputation, personal characteristics and mode of living may be initiated. You have the right to dispute the information reported. Upon written request, you are entitled to a complete and accurate disclosure of the investigator's nature and scope as well as a written summary of your rights and remedies under the Fair Credit Reporting Act. Inquiries should be directed to: Rent Quest, PO Box 2250, Everett, WA 98213. I/We certify that, to the best of my/our knowledge, all statements are true and complete. I/We authorize Rent Quest to utilize our information for the purpose of credit verifications and for marketing purposes at their discretion. I/We authorize Rent Quest to obtain all reports and verifications necessary to verify all information put forth in the above application and to furnish all information to the landlord named above. False, fraudulent or misleading information may be grounds for denial of tenancy or subsequent eviction.

Signed _____ Tenant Signed _____ Tenant Dated _____

I am aware that an incomplete application causes a delay in processing and may result if denial.

The information sought is solely for use in evaluation of the named applicant's tenancy.