

**APPLICATION TO RENT**

**MUST BE FILLED OUT COMPLETELY TO BE PROCESSED**

**RETURN TO:** Northern Pines – 321 W 1<sup>st</sup> St, NEWPORT WA 99156

**PHONE & FAX: 509-447-5922 Email: lesliemaki@gmail.com**

NAME (FIRST MI LAST) \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DRIVERS LIC.# \_\_\_\_\_

MAIDEN NAME OR ALIAS/ IF DIVORCED, PREVIOUS NAME(S) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PRESENT PHYSICAL ADDRESS \_\_\_\_\_

PHONE #(S) \_\_\_\_\_ EMAIL: \_\_\_\_\_

HOW LONG AT PRESENT ADDRESS \_\_\_\_\_ START DATE: \_\_\_\_\_ CURRENT RENT: \$ \_\_\_\_\_

REASON FOR MOVING \_\_\_\_\_ HAVE YOU GIVEN NOTICE: \_\_\_\_\_

CURRENT LANDLORD NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_ PREV RENT \$ \_\_\_\_\_

MOVE IN DATE: \_\_\_\_\_ MOVE OUT DATE: \_\_\_\_\_

PREVIOUS LANDLORD NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

NUMBER OF OCCUPANTS \_\_\_\_\_ NAMES/RELATIONSHIPS TO APPLICANT: \_\_\_\_\_

NUMBER OF OCCUPANTS WHO SMOKE \_\_\_\_\_ AGES OF OCCUPANTS: \_\_\_\_\_

# OF PETS \_\_\_\_\_ TYPE/BREED \_\_\_\_\_ # OF VEHICLES \_\_\_\_\_

MAKE/MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ PLATE # \_\_\_\_\_

MAKE/MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ PLATE # \_\_\_\_\_

# OF RV'S, CAMPERS, BOATS, MOTORCYCLES, OTHER: \_\_\_\_\_ DESCRIBE: \_\_\_\_\_

**PERSONAL REFERENCES (not listed elsewhere on application):**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

EMERGENCY CONTACT PERSON: \_\_\_\_\_ PHONE # \_\_\_\_\_

HAVE YOU OWNED A HOME IN THE PAST? \_\_\_\_\_ IF YES, HOW LONG? \_\_\_\_\_ HOW MANY? \_\_\_\_\_

HAVE YOU HAD A FORECLOSURE? \_\_\_\_\_ WHEN? \_\_\_\_\_

HAVE YOU FILED FOR BANKRUPTCY? \_\_\_\_\_ WHEN? \_\_\_\_\_ DISCHARGED? \_\_\_\_\_

HAVE YOU EVER BEEN EVICTED FROM ANY TENANCY? \_\_\_\_\_ EXPLAIN \_\_\_\_\_

HAVE YOU EVER WILLFULLY AND INTENTIONALLY REFUSED TO PAY RENT WHEN DUE? \_\_\_\_\_

WHY? \_\_\_\_\_

HAVE YOU EVER BEEN CHARGED FOR DAMAGES? \_\_\_\_\_ EXPLAIN \_\_\_\_\_

HAVE YOU EVER BEEN FOUND GUILTY OF A CRIME? \_\_\_\_\_ EXPLAIN: \_\_\_\_\_

PLEASE LIST AND INDICATE ALL SAVINGS (S) AND CHECKING (CK) ACCOUNTS

BANK NAME: \_\_\_\_\_ ACCOUNT TYPE \_\_\_\_\_

BALANCE: \_\_\_\_\_ DATE OPENED: \_\_\_\_\_

BANK NAME: \_\_\_\_\_ ACCOUNT TYPE \_\_\_\_\_

BALANCE: \_\_\_\_\_ DATE OPENED: \_\_\_\_\_

OTHER INCOME/ASSETS (RETIREMENT/CHILD SUPPORT/SSI/SSD): \_\_\_\_\_

	PRESENT OCCUPATION	PRIOR OCCUPATION
Employer or Self Employed dba		
Business Address:		
Phone Number:		
Position/Title Held:		
Dates of employment Start/Stop		
Monthly Gross Income:		

I HEREBY AUTHORIZE THE RELEASE OF FINANCIAL, EMPLOYMENT, CREDIT, CRIMINAL AND OTHER INFORMATION AS DISCLOSED IN THIS APPLICATION TO THE LANDLORD AND/OR AGENT. I HEREBY AUTHORIZE LANDLORD AND/OR AGENT TO VERIFY THE VALIDITY OF ALL THE ABOVE INFORMATION, AND TO INQUIRE NOW OR PERIODICALLY WITH MY EMPLOYERS, FINANCIAL INSTITUTIONS, AND ANY OF THE CREDIT REPORTING BUREAUS. I UNDERSTAND THAT PERSONS, EMPLOYERS, AND AGENCIES REFERRED TO IN THIS APPLICATION MAY BE CONTACTED, IN ADDITION TO OTHER AGENCIES. I AGREE TO SUPPLY ANY ADDITIONAL INFORMATION NEEDED BY LANDLORD AND/OR AGENT TO PROCESS THIS APPLICATION. I AGREE THAT LANDLORD AND/OR AGENT MAY TERMINATE ANY AGREEMENT ENTERED INTO IN RELIANCE ON ANY MISSTATEMENT MADE ABOVE. I DECLARE, UNDER PENALTY OF PERJURY, ALL OF THE ABOVE INFORMATION TO BE TRUE AND CORRECT, TO THE BEST OF MY KNOWLEDGE.

• APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_