

APPLICATION FOR RENTAL

LEASE TERM: _____	REFERRAL SOURCE: _____	DESIRED MOVE IN DATE: _____
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Notice: All adult applicants (18 years & older) must complete a separate application for rental.

The undersigned hereby makes application to rent unit # _____, located at Harbor Oaks Apartments 97 Byrd Drive Steilacoom, WA 98388 at the monthly rent of \$_____.

APPLICANT INFORMATION

Name: _____ Phone: _____
Last First MI Cell/Home Work

SS #: _____ - _____ - _____ Birth Date: _____ - _____ - _____ License/ID #: _____

OTHER OCCUPANTS

List names & birth dates of **all** additional occupants:

CURRENT ADDRESS

Street Address _____ City _____ State _____ Zip _____

Date In _____ Date Out _____ Landlord Name _____ Phone _____

\$ _____ Monthly Rent Reason for Leaving _____

PREVIOUS ADDRESS

Street Address _____ City _____ State _____ Zip _____

Date In _____ Date Out _____ Landlord Name _____ Phone _____

\$ _____ Monthly Rent Reason for Leaving _____

EMPLOYMENT & INCOME INFORMATION

Current Employer/Company _____	Supervisor _____	Phone _____	\$ _____ Monthly Income
Previous Employer/Company _____	Supervisor _____	Phone _____	\$ _____ Monthly Income
Additional Income: _____			\$ _____
Description _____			Monthly Amount
Description _____			\$ _____ Monthly Amount

BACKGROUND INFORMATION

Have you ever: Been evicted from tenancy? _____ Filed for bankruptcy? _____

Been convicted of a crime? (If yes, when?) _____
