

von Klein Property Management, LLC

1301 Ferry Street #2, Eugene, OR 97401

P.O. Box 11468, Eugene, OR 97440

Phone # (541) 485-7776 ~ Fax # (541) 334-6568

www.vonKleinRentals.com ~ vkpm@vonkleinrentals.com

Rental Application

APPLICANT INFORMATION

Name: Last _____ First _____ Middle Initial _____

Contact Numbers: Home: _____ Cell: _____ Email: _____

Date of Birth: _____ Driver's License or Id #: _____ State: _____ Expires: _____

How Many will reside: _____ SS #: _____ Passport/Visa #: _____

Name of Roommates: _____

EMPLOYMENT / INCOME INFORMATION

Employer: _____ Position: _____ Monthly Take Home Pay: \$ _____

Supervisor's Name: _____ Supervisor's Phone #: _____ Hire Date: _____

Employer's Address: _____ City: _____ State: _____ Zip: _____

Check What Applies: ☐ Full Time ☐ Part Time ☐ Permanent Employee ☐ Temporary Employee

Other Sources of Income:

Amount: \$ _____ Source: _____ Contact name: _____ Phone #: _____

Amount: \$ _____ Source: _____ Contact name: _____ Phone #: _____

Total Monthly Income: \$ _____

RESIDENTIAL/RENTAL HISTORY (at least 2 years)

(use additional pages as necessary)

Current Address: _____ Apt. #: _____ City: _____ State: _____ Zip: _____

Landlord's Name: _____ Phone #: _____ Rent Amount: \$ _____

Management Co.: _____ Move In: _____ Move Out: _____

Reason for Leaving: _____

Previous Address: _____ Apt. #: _____ City: _____ State: _____ Zip: _____

Landlord's Name: _____ Phone #: _____ Rent Amount: \$ _____

Management Co.: _____ Move In: _____ Move Out: _____

Reason for Leaving: _____

***Application continued on back.....

I certify that the information I have provided is true and correct to the best of my knowledge. I understand and accept that any information provided that is incomplete, inaccurate or falsified is grounds for denial or subsequent termination of tenancy. I authorize von Klein Property Management to make any inquiries deemed necessary for the verification of all information, including but not limited to obtaining a credit report and agree to furnish additional information upon request. I understand that once my application is approved I must commit to the unit by signing a contract and paying the first month's rent or decline the unit. If von Klein Property Management has not heard from me within 3 days of this application being approved I understand that I will no longer be considered for the unit. I understand that I will not be discriminated against based on race, color, sex, religion, or national origin. Furthermore, by signing below, I acknowledge that I have read and understand the screening process and policies of von Klein Property Management, LLC.

Applicant
Signature: _____

Date: _____

APPLICANT'S CREDIT INFORMATION
(Credit cards, utilities, any kind of credit you may have had)

Bank: _____ Account #: _____ ☐ Checking ☐ Savings
Branch Address: _____ Phone #: _____
Bank: _____ Account #: _____ ☐ Checking ☐ Savings
Branch Address: _____ Phone #: _____
Creditor: _____ Account #: _____ Phone #: _____
Creditor: _____ Account #: _____ Phone #: _____

HAVE YOU EVER: Been Evicted? ☐ Yes ☐ No Been Sued by a Landlord? ☐ Yes ☐ No

AUTOMOBILE INFORMATION

Year: _____ Make: _____ Model: _____ Color: _____ License #: _____ State: _____

PERSONAL REFERENCES
(non-relative, known for more than one year)

Name: _____ Address: _____ Phone #: _____
Name: _____ Address: _____ Phone #: _____

Name of nearest relative: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone numbers: Home: _____ Cell: _____ Work: _____

MISCELLANEOUS INFORMATION

Do you smoke? ☐ Yes ☐ No ; Do you have a pet? ☐ Yes ☐ No , If yes: What type? _____ How _____

Describe pet: _____ Age of Pet: _____ Is it spayed/neutered? ☐ Yes ☐ No

List all names used (maiden, nickname, alias, other marriages, _____

Do you have or intend to use: (Proof of insurance may be required)

A water bed? ☐ Yes ☐ No A piano? ☐ Yes ☐ No Other musical instrument? ☐ Yes ☐ No

A satellite dish? ☐ Yes ☐ No An aquarium? ☐ Yes ☐ No If yes: How large? _____ gallons

Have you ever been convicted or pled guilty/no contest to drug activity? ☐ Yes ☐ No

If yes, explain: _____ Date: _____

Have you ever been convicted or pled guilty/no contest to felony or misdemeanor? ☐ Yes ☐ No

If yes, explain: _____ Date: _____

**PROPERTY
INTERESTED
IN:**

1st Choice: _____ Unit # or Size: _____

2nd Choice: _____ Unit # or Size: _____

3rd Choice: _____ Unit # or Size: _____

Move in date desired: _____

☐ Summer session only ☐ School year only ☐ Summer & School Year

* see property for specific required lease dates

OFFICE USE ONLY: Date received in Office: _____ Time received in Office: _____

Rev. 5/11