

## **APPLICATION TO RENT**

## **APPLICANTS MUST HAVE:**

- •Good references from current and previous landlords
- •Approved credit and public records history
- •Monthly income equal to or greater than three times asking rent
- •Number of occupants per unit within the limits of the law

Property Name:						_ Unit	t #:				_
Full Legal Name:											_
Prior Names (if ap	Last Name		irst Name	Middle N	lame						_
Date of Birth											– r's
License #			•				` .			,	
Year/Make/Plate #											
Bank & Branch											_
Credit References				-							_
	,			•							•
1											
Are these accounts	s in your name	∍? If	not, under what	name(s)?_							_
Applicant's Current	t Employer				_Title						
Hire Date _	/ /	Salary (gros	ss) \$	/month	Superviso	or/Pho	ne	/			_
Previous Employer											
Dates Employed											
Nearest relative, of					•			·			
Name				-	•					Relationsl	hin
							h a a a . l l . /	```		_	•
Address								)		vv: (	)
If nearest relative is						_	-				
Name							_)				_
List other persons,	including rela	tives, to occup	by the apartmen	t. All occup	oants over	18 mι	ıst compl	ete sepa	rate a	pplications.	_
Full Legal Name			Occupation/Employer								
											1
											-
Do you plan to have Pet's Weight											nnly
Do any of the planne				□ No □ Yes							рріу
Has a landlord ever	•			□ No □ Yes	-						
Do planned occupan Renter's Insurance C			rance policy?	□ No □ Yes		ote age Phone		ow and u	odate ii	nsured's add	dress
Do planned occupan				□ No □ Ye	-				-		
Have planned occup					-		_	je/sentend	:e:		
Are you aware of cre			_		-	-					
How did you hear ab	Jout us? Vac	ancy sign p	orint ad websit	le reterral	Further of	uetalis:					

APPLICATION TO RENT	Applying for		Unit #									
page two Applicant's Full Name:												
List all places of residence over the last	four (4) years, listing the mos	st recent address first. Atta	ch additional page	if necessary.								
Full Address	City, State & Zip	Owner/Mgr Name	Phone	Dates (to-from)								
				/ / - / /								
				/ / - / /								
				/ / - / /								
I hereby authorize Seattle Consultant LL I agree a copy of this application may be												
Date: A	pplicant's Signature											
FOR USE	BY REFERENCES, LEASING	AGENT AND/OR RESIDENT N	MANAGER ONLY									
	SCREENII	NG RESULTS										
If written authorization is requested for release of references, fax/email this page of the Application only, to request completion and return.												
Landlord References: Please note response to the following questions.												
	PRESEN	IT RESIDENCE	<u>PRE</u>	VIOUS RESIDENCE								
a. Was rent paid promptly?												
b. Was tenant destructive or disrup	<del></del>		-									
c. Did tenant give proper notice to	<u></u>											
d. Would you re-rent to this tenant												
e. If no, why?												
f. Name and title of party giving ref	erence:											
g. Other comments:			-									
Income Verification												
Employment:												
a. Name of person giving inforn												
b. Length of employment:		_	•	/month /year								
c. Outlook for continued empl				Other Comments:								
Other Income Sources: (Housing All	owance, Government Assi	stance, Child Support, etc	c.)									
a. Name of person giving information												
b. Amount of Assistance allowed for												
c. Time period for which assistance	e is guaranteed:	Guaranteed by:										
Credit Record: Approved	No record-verify Social Se	c# See Property M	lanager  No	t Approved								
Public Record: No record Specifics:	Record, but not applicable		Manager 🗌 Re	ecord is applicable le secured electronically)								
<b>Determine Status of Application:</b>												
Application has been: accepted Reason:		uture vacancy	ied, due to reasor	n listed below:								
			Phone: (	)								
Date Screened E	By/Signature: □ As Resident	Manager ☐ As Leasing		<del>,</del>								

<u>Denied Applications</u> must state reason for denial and be kept on file with Phillips for a minimum of <u>five years</u>. Denial letter <u>must</u> be sent to applicant. <u>Accepted Applications</u> must be copied to file with original sent to management along with the completed lease/rental agreement.

## **DISCLOSURE NOTICE**

## Acknowledgement, Terms and Receipt:

I (We) hereby acknowledge the dollar amount required prior to move-in as noted below. I understand I acquire no rights in a rental unit until I sign a rental or lease agreement in the form submitted to me and make a holding deposit of \$\_ on the rental unit I have selected. The holding deposit is to be held in accordance with this Acknowledgement. In consideration of the landlord's holding of this unit for me, I hereby waive all rights to the return of this holding deposit. Said deposit shall be retained as liquidated damages in the event I do not choose to enter into the rental or lease agreement applied for herein. In the event said Landlord does not accept my(our) application for tenancy, the holding deposit shall be returned to the applicant(s). In the event both parties accept this tenancy applicant agrees that the holding deposit shall be applied to the amounts required for move-in, as listed below.

FUNDS LISTED AS PAID ABOVE. IF WRITTEN RECEIPTS ARE ISSUED IN ACCEPTANCE OF FUTURE PAYMENTS SUCH RECEIPTS

NOTE: A COPY OF THIS DISCLOSURE NOTICE SHALL CONSTITUTE ACKNOWLEDGEMENT OF AGENT/OWNER'S RECEIPT OF ALL PAYMENTS ARE TO BE MADE BY CHECK, MONEY ORDER OR CASHIER'S CHECK PAYABLE TO THE PROPERTY NAME OR Seattle Consultant LLC, AS AGENT. NO CASH WILL BE ACCEPTED. Lease/Rental Agreement Terms, Rent. Fees and Deposits: Your Rental Agreement will be month-to-month. Your Lease Agreement will be for a period of months. The monthly rent for unit # at nt for unit # \_\_\_\_\_at \_\_\_\_shall be \_\_\_\_provided it is paid on the 1st day of each month or as stated otherwise in your rental/lease agreement. Before moving into this rental unit, you will need to pay to Agent/Owner the sum of the following amounts listed below: First full month's rent Security Deposit\* Application Processing Fee (\$40.00 per applicant) Non-Refundable Cleaning Fee Other: +\$\_\_\_\_\_ Less Amounts Paid (Holding Deposit/Processing) <\_\_\_ TOTAL BALANCE DUE PRIOR TO MOVE-IN \$ \*The Security Deposit is refundable upon termination of tenancy in accordance with the terms of your rental or lease agreement. Holding Deposits collected at the time of application may be applied to payment of the security deposit, if tenancy is accepted. The non-refundable cleaning charge in not refundable. **Acknowledgements:** Agency Acknowledgement. Applicant is aware that the parties negotiating this tenancy are not the property owners(s) but are acting as Agents for the property owners. To further understand the agency relationship, a Law of Real Estate Agency pamphlet attached. I acknowledge receipt of the pamphlet by my signature below. Acknowledgement of Terms by Applicant. By signature below applicants acknowledge understanding of terms outlined above. Date **Applicant** Date Co-Applicant Date Co-Applicant Acknowledgement by Leasing Agent: Completed application(s) was(were) received from the above party(ies) on \_\_\_\_\_/ at \_\_\_\_ at \_\_\_\_ AM/PM at for an estimated move in date of \_\_\_\_\_/\_\_\_\_. Property Name \_\_\_\_\_Phone: (\_\_\_\_)\_\_\_\_

Signature, Leasing Agent:\_\_\_\_\_\_, As Agent for Property Owner



Date

