$\begin{tabular}{ll} \bf RENTAL\ APPLICATION & to\ be\ completed\ by\ each\ ADULT\ APPLICANT \\ \end{tabular}$

Verified Driver's	e or State I.D). F	FULL REPORT CR		REDIT PLUS FAST I					
□ Yes □ No										
□Co-Signer		□ W/ Curr	ent Tenar	nt Applicatio		EQUAL HOUSING OPPORTUNITY				
MANAGEMENT COMPANY				COMMUNITY NAME				CONTACT		
MOVE-IN DATE UNIT #			MONT	HLY RENT \$	LEASE TYPE DESIRED)	TELEPHONE ()		
APPLICAN'	TIN	FORMA'	ΓΙΟΝ		'					
LAST NAME FIRST		MIDDLE		DOB SOCIAL SECURI		CURITY #	# DRIVER'S LIC. #			
ROOMMATE(S) NAME(EMAIL				
CURRENT	RES	IDENCE	1							
STREET ADDRESS			APT#			CITY		STATE	ZIP	
HAVE YOU GIVEN LEGAL NOTICE TO VACATE? YES □ NO □			RENT □ OWN □	MOVE-IN DATE: MOVE-OUT DATE:	MONTHLY RENT \$		TELEPHONE ()			
LANDLORD/MTG. COMPANY CITY				STATE ZIP LANDLORD D			AY PHONE 1		LANDLORD EVENING PHONE	
REASON FOR VACATING:				LIST ALL ROO			MMATES:			
PREVIOUS	RES	IDENCE	<u> </u>				I			
STREET ADDRESS			APT#			CITY		STATE	ZIP	
DID YOU GIVE LEGAL NOTICE TO VACATE? YES □ NO □			RENT OWN	MOVE-IN DATE: MOVE-OUT DATE:	MONTHLY RENT \$		TELEPHONE ()			
LANDLORD/MTG. COMPANY CITY				STATE ZIP LANDLORD E		DAY PHONE		LANDLORD EVENING PHONE ()		
REASON FOR VACATING:					LIST ALL ROO	MMATES:				
EMPLOYM	ENT	' / INCO	ME		1		I			
			ITION	TELEPHONE ()		SUPERVISOR'S NAME		SALARY/MON TH	DATE OF HIRE	
PREVIOUS EMPLOYER PO		ITION	TON TELEPHONE ()		SUPERVISOR'S NAME		SALARY / MONTH	FROM: TO:		
ADDITIONAL SOURCE	S OF MO	NTHLY INCOME	(List all income	to be included for qualification	ation):	SOURCE:		TELEPHONE		
\$ / Month									()	
BANK NAME BR.		NCH	TELEPHONE ()		CHECKING ACCT #		SAVINGS ACCT #			
EMERGEN	CYC	CONTAC	T							
NAME RELAT		ATIONSHIP	ADDRESS	T1 (TELEPHONE ()				

ADDITIONAL INFORMATION											
LIST A	LL VEHIC	LES TO	BE PAR	KED ON SIT	OTHER OCCUPANTS						
MAKE MODEL YEAR COLOR			LICENSE#	STATE	OCCI	UPANT NAME	D.O.B.				
HAVE Y	OU ESTABLISE	IED RETAII	. CREDIT?	YES □ NO □		TYPE AND SIZE OF PETS:					
WILL YOU BE MOVING IN ANY OF THE FOI WATERBED □ AQUARIUM □ MUSICA				LOWING ITEMS? LL INSTRUMENT []	DO YOU HAVE RENTERS INSURANCE? YES NO Carrier: Policy #:					
HAVE YOU EVE	ER BEEN EVIC	CTED? Y	ES□ N	IF YES, PR	OVIDE I	DATE(S) AND LOCATION(S):	<u> </u>				
HAVE YOU OR	ANY PERSON	WHO WILI	OCCUPY T	HE UNIT EVER B	BEEN CO	ONVICTED. PLEAD GUILT	Y. NO-CONTEST OR HAVE CURR	ENT PENDING			
HAVE YOU OR ANY PERSON WHO WILL OCCUPY THE UNIT EVER BEEN CONVICTED, PLEAD GUILTY, NO-CONTEST OR HAVE CURRENT PENDING CHARGES TO ANY FELONY OF MISDEMEANOR? YES DESCRIBE OFFENSE: DATE OF OFFENSE:											
ARE YOU OR A	ARE YOU OR ANY PERSON WHO WILL OCCUPY THE UNIT A REGISTERED SEX OFFENDER?										
YES □ NO □ IF YES, DATE AND LOCATION OF REGISTRATION:											
	THE FOLI	OWING IN	FORMATIO	N IS SUBJECT TO	CHANG	GE PRIOR TO EXECUTION	N OF THE RENTAL AGREEMENT				
	RENT				DEPO	OSITS	FEES				
AMOUNT CHARGE	THE FOLLOWING ARE MAXIMUM AMOUNTS. THE ACTUAL AMOUNT CHARGED WILL DEPEND ON UNIT SIZE,			SECURITY DEPOSIT MINIMUM \$			LATE RENT PAYMENT FEE \$				
SCREENING RESULUNIT RENT	LTS, AND OTHER	FACTOS.		SECURITY DEPOSIT MAXIMUM\$			LEASE BREAK FEE \$(NOT TO EXCEED 1.5 X RENT)				
CIVIT KENT	UNITRENT \$			PET		\$	N.E.S. CHECK FEE OF \$25 + BANK CHARGES				
\$				GARAGE / STORAGE	i.	\$	UNAUTHORIZED PET FEE \$				
<u> </u>				OTHER		\$	SMOKE ALARM / CARBON MONOXIDE ALARM TAMPERING FEE \$				
	\$			OTHER		\$	LOST KEY, ACCESS CARD FEE	\$			
	\$			OTHER		\$	NON-COMPLIANCE FEE*	\$			
APPLICANT'S INITIALS				APPLICANT SCRE	ENING (CHARGE \$	LATE PAYMENT OF UTILITY FAILURE TO CLEAN PET WASTE FAILURE TO CLEAN GARBAGE/RUBBISH A PARKING VIOLATIONS OR IMPROPER USE OF VEHICLES NOT TO EXCEED \$50 PER NON-COMPLIANCE				
Approximate nu If the blanks abo I certify that the	mber of units of mber of applic ove are not fille above informations	ations previ ed in, then the ation is corn	ously accepted accepted accepted and commerced and commerced and commerced accepted	ed and currently un t one unit available plete and hereby a	der cons and ther uthorize	re are no applications ahead you to do a credit check an	and in the area requested by applican application(s). of yours currently under consideration and the same and inquiries you feel necessof this application. If any information	on. sary to evaluate my			
application is latentails the check the accuracy of the receipt for the applicants will he to execute a rent steps required al	er found to be ting of the app any information he screening chavetal agreement whove, they will uch time as a second to be appeared to be appeared to be a second to be appeared to be a second to	false, this is licant's credin provided that arge. The sea hours from which will probe deemed trental agreen	grounds for it, rental histo to the owner creening serventhe time of covide for the to have refument is signe	termination of ter- ory, employment h- /agent by the scree- rice is Pacific Scree- notification to either forfeiture of the cased the unit and the	nancy. Over istory, purening ser ning Inc. her execute deposit if ne next a	when/Agent has charged a sublic records and other criterivice or credit reporting ager, P.O. Box 25582, Portland, ute a rental agreement and not applicants fail to execute the application for the unit will	of this application. If any information creening charge as set forth above. It is for residency. The applicant has now. Applicant's copy of this signed OR 97298 (503) 297-1941. If the applicate all deposits required thereunde the rental agreement. If applicants fabe processed. Owner / Agent shall a copy of the Criteria for Residence.	Applicant screening the right to dispute application shall be plicant is approved, r or make a deposit il to timely take the have no liability to			
Signed					(A _I	oplicant)	Dated				
Signed					(Ag	gent for Owner)	Dated				