

MANAGEMENT COMPANY	APARTMENT COMMUNITY	COMMUNITY CONTACT	COMMUNITY TELEPHONE #

CLIENT# _____

<input type="checkbox"/> CRIMINAL ONLY	<input type="checkbox"/> CREDIT ONLY	<input type="checkbox"/> CREDIT / CRIMINAL	<input type="checkbox"/> COMPREHENSIVE
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Each adult over the age of 18 must fill out a separate application.

APPLICATION TO RENT APARTMENT # _____ MOVE-IN DATE _____ RENT \$ _____ LEASE _____

1 Applicant Roommate w/ _____ Co-Signer Section 8 Employment Check

APPLICANT'S (LEGAL) Last Name		First	Middle	Soc. Sec. #	Birthdate	Driver's License # and State	
Other names used:		1	Full Name	RELATIONSHIP	DOB	3	Full Name
Type and size of pets: (Keeping a pet requires a deposit and owner's consent)		2	Full Name	RELATIONSHIP	DOB	4	Full Name

RESIDENCE HISTORY

APPLICANT'S Present Address	City	State	Zip	From _____ To _____	Phone	Monthly Payment \$
Name of Present Landlord <input type="checkbox"/> Mortgage Co. <input type="checkbox"/> Apartment Community <input type="checkbox"/> Relative/Friend <input type="checkbox"/> Employer/Corporate Housing <input type="checkbox"/> Independent Landlord (Please ✓ one box)						
Landlord Daytime Phone:			Landlord Evening Phone:			
APPLICANT'S Previous Address	City	State	Zip	From _____ To _____	Phone	Monthly Payment \$
Name of Previous Landlord <input type="checkbox"/> Mortgage Co. <input type="checkbox"/> Apartment Community <input type="checkbox"/> Relative/Friend <input type="checkbox"/> Employer/Corporate Housing <input type="checkbox"/> Independent Landlord (Please ✓ one box)						
Landlord Daytime Phone:			Landlord Evening Phone:			

EMPLOYMENT HISTORY *(if transferring give a local contact number)*

APPLICANT Employed By	Monthly Salary \$	Supervisor's Name	How Long? _____ Yrs. _____ Mo's.
Address	City	State	Zip
Phone		Occupation / Department	
APPLICANT <input type="checkbox"/> Previous Employment <input type="checkbox"/> Second Job	Monthly Salary \$	Supervisor's Name	How Long? _____ Yrs. _____ Mo's.
Address	City	State	Zip
Phone		Occupation / Department	

ADDITIONAL INCOME Additional income such as child support, alimony or separate maintenance need not be disclosed unless such Additional income is to be included for qualification hereunder
 Amount of \$ _____ per _____ Source _____

CREDIT & LOAN REFERENCES

Auto #1 (Make & Model)	License Plate	State	Car Payment made to	Address	Monthly Payment \$
Loans, Charge Accounts & Credit Cards owed to	Account #	Address	Total Debt \$	Monthly Payment \$	
Bank or Savings and Loan	Branch	Address	Checking Account #		
Bank or Savings and Loan	Branch	Address	Checking Account #		

IMPORTANT INFORMATION

Name of APPLICANT'S Nearest Relative	Relationship	Address	City	State	Zip	Phone ()
Name of APPLICANT'S Nearest Relative	Relationship	Address	City	State	Zip	Phone ()
Emergency Contact	Relationship	Address	City	State	Zip	Phone ()
Personal Reference	Relationship	Address	City	State	Zip	Phone ()

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? YES NO **IF YES: CITY** _____ **STATE** _____
PLEASE LIST ALL OFFENSES EXCLUDING TRAFFIC OFFENSES, ATTACH SEPARATE SHEET IF NECESSARY.

ARE YOU OR ANYONE WHO WILL BE RESIDING IN THE UNIT BE REQUIRED TO REGISTER AS A SEX OFFENDER? YES NO

HAVE YOU EVER BEEN ASKED TO VACATE BY CURRENT/PREVIOUS LANDLORD? YES NO
IF YES: CITY _____ **STATE** _____ **APT NAME** _____

In compliance with the fair credit reporting laws, you are advised that a screening will be conducted regarding the information listed on this application and your character, general reputation and rental history. By signing this application, you authorize MOCO, Inc., whose address is P.O. Box 2826, Seattle, WA 98111, to obtain credit reports, rental and employment verification, bank information and character information as necessary. MOCO, Inc. is authorized to release any information obtained during the screening process to landlord and landlord's agents. Applicant has the right to dispute the accuracy of information obtained during the screening process. If the application is denied because of credit, applicant may obtain a copy of the credit report from the credit reporting agency.
 I certify that to the best of my/our knowledge all statements are true and complete. False, fraudulent or misleading information may be grounds for denial of tenancy or subsequent eviction.

Non-Refundable Process Fee \$ _____ **CHECK/MONEY ORDER #** _____

Applicant understands that he/she acquires no rights in an apartment until a holding deposit in the amount of \$ _____ has been paid. Applicant requests landlord to hold Unit _____ for applicant while the screening process is completed. If this application is not accepted, the holding deposit will be refunded. If the application is accepted and applicant chooses not to occupy the unit being held, applicant forfeits the holding deposit and no portion of it shall be returned.

Signed _____ Dated _____
 Applicant

Signed _____ Dated _____
 Landlord Position

I am aware that an incomplete application causes a delay in processing and may result in denial of tenancy.

