

Rental Application

Separate application required from each applicant age 18 or older

THIS SECTION TO BE COMPLETED BY LANDLORD OR AGENT

Address of Property to be Rented: _____ 1205 W. Highland Ave, Hermiston, OR 97838 _____

Rental Term: month-to-month lease from _____ to _____

Amounts Due Prior to Occupancy:

First month's rent:	\$	
Security Deposit:	\$	
Other (specify): _____	\$	
TOTAL	\$	

Apartment # _____ Scheduled Date Available: _____

PLEASE PROVIDE COPY OF PHOTO IDENTIFICATION

Full Name – include all names you use(d): _____

Home Phone: () _____ Work Phone: () _____

Social Security Number: _____ Driver's License Number/State: _____

Vehicle Make: _____ Model: _____ Color: _____ Year: _____

License Plate Number/State: _____ Date of Birth: _____

Additional Occupants

List everyone, including children, who will live with you:

<u>Full Name</u>	<u>Relationship to Applicant</u>	<u>Date of Birth</u>

Rental History

Current Address: _____

Dates Lived at Address: _____ Reason for Leaving: _____

Landlord/Manager: _____ Landlord/Manager's Phone: () _____

Previous Address: _____

Credit and Financial Information (cont.)

<u>Credit Accounts & Loans</u>	<u>Type of Account</u> <small>(Auto loan, VISA, etc)</small>	<u>Account Number</u>	<u>Name of Creditor</u>	<u>Amount Owed</u>	<u>Monthly Payment</u>
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Other Major Obligations: _____

Miscellaneous

Describe water-filled furniture you want to have in the rental property: _____

Do you smoke? Yes No

Have you ever: Filed for bankruptcy? Yes No Been sued? Yes No

Been evicted? Yes No Been convicted of a crime? Yes No

Explain any "Yes" answers above: _____

References and Emergency Contact Information

Personal Reference: _____ Relationship: _____
Address: _____

_____ Phone: () _____

Personal Reference: _____ Relationship: _____

Address: _____

_____ Phone: () _____

Contact in Emergency: _____ Relationship: _____

Address: _____

_____ Phone: () _____

I certify that all the information given above is true and correct and understand that my lease or rental agreement may be terminated if I have made any false or incomplete statement in this application. I authorize verification of the information provided in this application from all my credit sources, credit bureaus, current and previous landlords and employers, and personal references.

Date

Applicant

Thank You!

Notes (Landlord/Manager): _____

Consent to Background and Reference Check

I authorize **Living Quarters Properties LLC**, operating as the Highland Manor Apartments, to obtain information about me from my credit sources, court records, current and previous landlords, and employers and personal references. I authorize my credit sources, credit bureaus, current and previous landlords and employers, and personal references to disclose to **Living Quarters Properties LLC**, operating as the Highland Manor Apartments, such information about me as he or she may request.

Name

Address

City

State

Zip

Phone Number

Date

Applicant