

BANK

1) Bank: _____ Branch: _____ Type/Account #: _____
2) Bank: _____ Branch: _____ Type/Account #: _____

REFERENCES

1) Relative: _____ Telephone: () _____ - _____
Name Address Relationship
2) Emergency Contact: _____ Telephone: () _____ - _____
Name Address Relationship
3) Personal Reference: _____ Telephone: () _____ - _____
Name Address Relationship
4) Personal Reference: _____ Telephone: () _____ - _____
Name Address Relationship

PERSONAL PROPERTY

1) Automobile: Make _____ Model _____ Year _____ License # _____ State _____
2) Automobile: Make _____ Model _____ Year _____ License # _____ State _____
3) Other Vehicles/Boats _____ Model _____ Year _____ License # _____ State _____

Do you own the following: Trampoline? Yes No Water-filled furniture? Yes No Fish Tank or Aquarium? Yes No

PET # 1 Type: _____ Size _____ Weight _____ Has Pet ever injured anyone or damaged anything? <input type="checkbox"/> Yes <input type="checkbox"/> No	PET #2 Type: _____ Size _____ Weight _____ Has Pet ever injured anyone or damaged anything? <input type="checkbox"/> Yes <input type="checkbox"/> No
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APPLICANT'S COMMENTS & EXPLANATIONS:

MEMBERS OF HOUSEHOLD

For purposes of identification only, please list names and either ages or dates of birth of other persons to occupy unit:

APPLICANT SCREENING CHARGE DISCLOSURE(S)

- 1) Owner/Agent may obtain a credit report, or a tenant screening report which generally consists of:
 - a) Credit history including credit report;
 - b) Public records, including but not limited to judgments, liens, evictions and status of collection accounts;
 - c) Current obligations and credit ratings; and/or
 - d) Criminal records or other information verification.

- 2) Owner/Agent is requiring payment of an Applicant Screening Charge \$ NO CHARGE none of which is refundable unless the Owner/Agent does not screen the applicant. This application is valid for up to two weeks from date of receipt by Owner/Agent.

I understand I have the right to dispute the accuracy of any information provided to the Owner/Agent by a screening service or credit reporting agency. I am aware that an incomplete application may cause delays or result in denial of tenancy. I certify the above information is correct and complete and hereby authorize the Owner/Agent to make any inquiries the Owner/Agent feels necessary to evaluate my tenancy and credit standing (including, but not limited to credit reports). If Owner/Agent is requiring payment of an applicant screening charge, I acknowledge receiving a copy of or reading Owner/Agent's Screening Guidelines.

No marijuana, medical or otherwise, may be grown, stored or consumed on the premises without the prior written consent of Owner/Agent.

Applicant _____ Date _____