

## SHADED SECTIONS TO BE COMPLETED BY OWNER/AGENT

Owner/Agent Name: \_\_\_\_\_ Date/time completed application received: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

RHAWA Screening Package:    Basic    Premium    Background    Other \_\_\_\_\_

## APPLICANT INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security/ITIN#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Government Issued ID#: \_\_\_\_\_

OWNER/AGENT: Visual Proof Of:    Driver's License    State ID    SS Card    Other \_\_\_\_\_

## OCCUPANCY INFORMATION

List all persons in addition to yourself that will also be residents, including a Date Of Birth (DOB) for each. All persons 18 or older must complete separate rental applications and pay a screening fee.

Resident: \_\_\_\_\_ DOB: \_\_\_\_\_ Resident: \_\_\_\_\_ DOB: \_\_\_\_\_

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Are you, or any other resident, a smoker?                      Yes    No

Do you have renter's insurance?                                      Yes    No

Do you have a waterbed or aquarium over 20 gallons?    Yes    No

Will animals reside in the unit?                      Yes    No    If yes, how many? \_\_\_\_\_ Weight(s) \_\_\_\_\_

Type(s) \_\_\_\_\_ Breed(s) \_\_\_\_\_

## PERSONAL BACKGROUND HISTORY

In the past 7 years, have you or any occupant been convicted of, or do you have any charges pending for a criminal offense?    Yes    No

If yes, explain: \_\_\_\_\_

Are you or any occupant required to register as a sex offender?    Yes    No

## FINANCIAL HISTORY

Current monthly expenses/financial obligations:    Car: \$ \_\_\_\_\_    Loan: \$ \_\_\_\_\_    Credit Cards: \$ \_\_\_\_\_

Other (describe): \_\_\_\_\_ \$ \_\_\_\_\_

Have you ever filed for bankruptcy?    Yes    No

## PREVIOUS RESIDENCE HISTORY

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Landlord Name: \_\_\_\_\_ Landlord Phone#: \_\_\_\_\_ Dates of Occupancy: \_\_\_\_\_ Rent \$: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Landlord Name: \_\_\_\_\_ Landlord Phone#: \_\_\_\_\_ Dates of Occupancy: \_\_\_\_\_ Rent \$ \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Landlord Name: \_\_\_\_\_ Landlord Phone#: \_\_\_\_\_ Dates of Occupancy: \_\_\_\_\_ Rent \$ \_\_\_\_\_

## PREVIOUS RESIDENCE HISTORY (CONTINUED)

Have you given notice of termination of tenancy to your current landlord?    Yes    No    For what date are you seeking occupancy? \_\_\_\_\_

Have you ever been served an unlawful detainer notice or been evicted?    Yes    No

If yes, include month/yr and address: \_\_\_\_\_

Have you ever received a notice to pay rent or vacate and/or another unlawful detainer notice from a landlord?    Yes    No

If yes, describe circumstances: \_\_\_\_\_

## INCOME HISTORY - LIST EMPLOYMENT AND/OR OTHER SOURCES OF INCOME

Organization (current): \_\_\_\_\_ Position: \_\_\_\_\_ Monthly: \$ \_\_\_\_\_

Date Range: \_\_\_\_\_ Contact Name (HR/Supervisor): \_\_\_\_\_ Phone: \_\_\_\_\_

Other current income (attach documentation/verification): \_\_\_\_\_ Monthly: \$ \_\_\_\_\_

Organization (previous): \_\_\_\_\_ Position: \_\_\_\_\_ Monthly: \$ \_\_\_\_\_

Date Range: \_\_\_\_\_ Contact Name (HR/Supervisor): \_\_\_\_\_ Phone: \_\_\_\_\_

Other previous income (attach documentation/verification): \_\_\_\_\_ Monthly: \$ \_\_\_\_\_

## VEHICLES

Describe all vehicles (car, boat, trailer, RV, motorcycle, etc.) you would like to keep on the property. Written permission separate from this application must be obtained to park on premises.

Type: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Plate#/State: \_\_\_\_\_

Type: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Plate#/State: \_\_\_\_\_

Type: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Plate#/State: \_\_\_\_\_

## EMERGENCY/PERSONAL CONTACT

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone#: \_\_\_\_\_

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## ACKNOWLEDGEMENT

In compliance with the Fair Credit Act and RCW 59.18.257 (2), this is to inform you that a credit investigation involving the statements made on this application for tenancy will be initiated. Any false, fraudulent or misleading information provided on the application may be grounds for denial of tenancy and/or forfeiture of rental or lease agreement. An incomplete application causes delay in processing and may result in denial of tenancy. If you are declined due to the consumer report, you may obtain a free copy of your credit report from the bureau it was obtained from within 60 days of denial. You also have the right to dispute the accuracy of the report and/or add a consumer statement to the report. This is NOT an agreement to rent and all applications must be approved. Disputes: If the screening of your application for tenancy included RHAWA's Full Credit Report and you wish to dispute any or all information on your credit report, contact Rental Housing Association to file the dispute on your behalf. Rental Housing Association of WA - Tenant Screening 2414 SW Andover St, Ste D207 Seattle, WA 98106; Phone: (206) 283-0816; Email: screening@RHAWA.org

A non-refundable processing fee of \$ \_\_\_\_\_ is required per applicant for non-refundable tenant screening fees.

I certify to the best of my knowledge all statements are true. I authorize the agent/owner for initial tenancy and again upon any future lease modifications or renewals to verify the information provided on the application including, but not limited to, obtaining credit reports, character reports, civil and/or criminal records, verifying source of income and rental history. I understand that false, fraudulent or misleading information may be grounds for denial of tenancy and/or forfeiture of my rental or lease agreement.

\_\_\_\_\_ By initialing, I acknowledge having been notified in writing, or by posting, of what types of information will be accessed to conduct the tenant screening and what criteria may result in denial of the application, as required by RCW 59.18.257.

Applicant Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_