

SHADED AREA FOR LANDLORD/MANAGER USE ONLY

Landlord/Manager Contact Info: _____

RHA Member # _____

Name: _____

Check one:

Phone: _____

RHA
529 Warren Ave N
Seattle, WA 98109
206-283-0816 Fax 206-286-9461

_____ Level 1 Report (credit & civil)

Fax: _____

_____ Level 2 Report (credit, civil & criminal)

RENTAL APPLICATION

DATE _____

MANAGER'S CHECKLIST: Visual proof of: Driver's Lic. State I.D. Soc. Sec. Card Other

APPLICANT INFORMATION

(Use Other Side Whenever Necessary—Please Print Neatly)

Rental/Lease address for which you are applying _____

Applicant's E-mail Address _____

Applicant's Last Name	First Name	Middle	Social Security Number	Date of Birth	Driver's License & State Issued
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Spouse's Last Name	First Name	Middle	Former Name (if applicable)	Social Security Number	Date of Birth	Driver's License & State Issued
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List other persons to reside with you, including relatives. *(Separate Applications required except for spouse, if they share same last name)*

Name	Occupation	Social Security #
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1. _____
2. _____
3. _____
4. _____

RESIDENCE HISTORY

Current Address	City	State	Zip	Phone #, inc. Area Code	Dates of Occupancy	Monthly Payment	Rent or Own?
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Landlord's Name	Address	Day Phone	Evening Phone
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Previous Address	Phone #, inc. Area Code	Dates of Occupancy	Monthly Payment	Rent or Own?
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Landlord's Name	Address	Day Phone	Evening Phone
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EMPLOYMENT AND INCOME

(Applicant) Current Employer	Address	Position	Monthly Income	Since	Supervisor/HR Name & Phone
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(Applicant) Previous Employer or 2nd Employment (circle one)	Address	Position	Monthly Income	From	To	Reason for Leaving
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(Spouse) Current Employer	Address	Position	Monthly Income	Since	Supervisor/HR Name & Phone
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(Spouse) Previous Employer or 2nd Employment (circle one)	Address	Position	Monthly Income	From	To	Reason for Leaving
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Other Source(s) of income (e.g. Social security, Alimony, Child Support that you want included in considering this application.)	Monthly Income
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I/We certify that to the best of my/our knowledge, all statements are true and complete. I/We further authorize to obtain credit reports, character reports, civil and/or criminal records, and rental history as needed to verify all the information put forth in this application or a copy of it. I/We are aware that an incomplete application causes delay in processing and may result in denial of tenancy. I/We understand that false, fraudulent or misleading information may be grounds for denial of tenancy and/or forfeiture of my rental or lease agreement.

Signed _____ Signed _____ Date _____

AGENT _____ Title _____ Date _____



Bank References

1.	Name of Financial Institution & Phone Number	Type of Account	Account # (optional)	Average Balance	Any NSF's?
2.	Name of Financial Institution & Phone Number	Type of Account	Account # (optional)	Average Balance	Any NSF's?

Has any person that will be residing at this residence:

• Ever been evicted? No () Yes () If yes include month/yr & address _____

• Ever received a notice to pay rent or vacate and/or another unlawful detainer notice from a landlord? No () Yes ()

If yes, describe circumstances. _____

• Ever been convicted of a civil or criminal offense? No () Yes () Explain: _____

• Been registered as a sex offender? No () Yes () • Are you a smoker? No () Yes ()

• Do you have a waterbed? No () Yes () If yes, proof of waterbed insurance is required.

For what date are you seeking occupancy? _____ Desired duration of lease? _____

Have you given notice of termination of tenancy to your current landlord? No () Yes ()

Pet(s)? No () Yes () If yes, How many? _____ Type(s) _____ Weight(s) _____ Breed(s) _____
Spayed/Neutered? No () Yes () • Licensed? No () Yes () • Aquarium? No () Yes () • Certified Service Animal? No () Yes ()

VEHICLE INFORMATION

Prior written permission separate from this application must be obtained to park on premises.

Vehicle Make	Model	Year	Color	Plate #	Financed By	Monthly Payment
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Vehicle Make	Model	Year	Color	Plate #	Financed By	Monthly Payment
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Description of any other vehicles (boat trailer, truck, RV, motorcycle, etc.) you would like to keep on property.

Vehicle Make	Model	Year	Color	Plate #	Financed By	Monthly Payment
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EMERGENCY CONTACT

Name	Relationship	Address	City	State	Zip	Area Code	Phone Number
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PERSONAL CONTACT

Name	Relationship	Address	City	State	Zip	Area Code	Phone Number
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NON-REFUNDABLE PROCESS FEE \$ _____. In compliance with the Fair Credit Reporting Act and RCW 59.18.257(2), this is to inform that a credit investigation involving the statements made on this application for tenancy at the above property is being initiated. If you are denied tenancy due to your credit report, you may obtain a free copy of your report from the bureau it was obtained from within 60 days of denial. (Equifax, Experian or TransUnion). You also have a right to dispute the accuracy of the report and/or add a consumer statement to the report. RHA uses Equifax, they may be contacted at 800-685-1111, PO Box 740241, Atlanta, GA 30374-0241. Issues related to civil or criminal records should be directed to RHA.

I/We certify that to the best of my/our knowledge, all statements are true and complete. I/We further authorize to obtain credit reports, character reports, civil and/or criminal records, and rental history as needed to verify all the information put forth in this application or a copy of it. I/We are aware that an incomplete application causes delay in processing and may result in denial of tenancy. I/We understand that false, fraudulent or misleading information may be grounds for denial of tenancy and/or forfeiture of my rental or lease agreement.

Signed _____ Signed _____ Signed _____ Date _____

AGENT _____ Title _____ Date _____

