

### **NW CHOICE REALTY**

### 4705 Lacey Blvd SE, Suite B, Lacey WA 98503

Office: 360-350-4656 Fax: 360-350-4654 Direct: 360-701-9664 Email: bill@nwchoice.com

# **Application to Rent**

Property Address:		Un	it# City _		WA Zip	
Lease Term	Move-In	Date				
Monthly Rent \$	Deposit	\$				
Applicant's Phone #	Applicant's	Phone #		Applicant's		
			nformatio			
	Use separate appl	ication for ea	ch applicant,	except for sp	ouse	
Driver's License	or Photo ID required- Ir	complete or	false informat	ion may resu	lt in DENIAI	of application
Last Name:	First N	ame:		Initial	SSN	
Driver's License #						
Address on Driver's License _			_ City	ST		Zip
	S	pouse's Ir	nformatio	า		
Driver's License	or Photo ID required- Ir	complete or	false informat	ion may resu	lt in DENIAI	of application
Last Name:	First N	ame:		Initial S	SSN	
Driver's License #		ST	Expires _	[	ate of Birth	
Address on Driver's License _			_ City	ST		Zip
		Residence	e History			
	Incomplete or false i		•	ENIAL of app	lication	
Present Address:	<u>-</u>		-			Zip
Do you: Own? Rent?						
Current Phone#:				<del></del>		
How long at current address?						
Landlord name:						
Landlord's Daytime phone:		_Landlord's E	evening phone			
Reason for moving:						
Previous Address:				ST	Zip	
Did you: Own? Rent?	Live with Rela	tives?	Other?			
How long at previous address	s?Dates:		to			
Landlord name:		City	9	ST		
Landlord's Daytime phone #:		Landlord	l's Evening pho	ne #:		
Reason for moving:						
	Ар	plicant's I	Employme	nt		
	Paycheck stubs,	tax return or	letter of hire r	nay be requi	red	
Current Employer:			Phone: _			
Address:				City		ST
Position:						
Employment Dates:	to	_ Fulltime	Part-time	Temp	Self Empl	oyed
Previous Employer:						
Address:				City		ST
Position:						
Employment Dates:	to	_ Fulltime	Part-time	Temp	_ Self Emplo	oyed

# **Spouse Employment**

## Paycheck stubs, tax return or letter of hire may be required

Current Employer:			Phone: _		
Address:				City	ST
	Supervisor Name:				
Employment Dates:	to	_ Fulltime Part-t	ime Temp	Self Employed	
Previous Employer:			Phone:		
Address:				City	ST
Position:	Supervisor N	lame:		Monthly Salary: \$	
Employment Dates:					/ed
	List	t All Other Pro	posed Occ	upants:	
Name:			Age:	Relationship	p:
Name:			Age:	Relationshi	ip:
Name:			Age:	Relationshi	ip:
Car Make:	Year:	Model		License Plate #	
Car Make:	Year:	Model		License Plate #	
Car Make:					
Nearest Relative:			Address		
City:ST					
Emergency Contact:			Addre	2SS:	
City:ST					
,					
Additional Income: Applica	nt Source: _			Amount \$	
Additional Income: Spouse	Source:			Amount \$	
Pets: Yes No If y	es, list pets:				
Waterbed: Yes No	Do you have v	waterbed insurance?	Yes No _	Smoker No	on Smoker
Have you ever been evicted	or left a landlord	owing money? Yes _	No		
If yes, Name and Phone of L	andlord:				
Have you ever been evicted	of a criminal offer	nse: Yes No	Type of offen	se:	
Explain nature of offense: _					
I understand I acquire no rig	=	eferenced property	until I sign this	application and submit a	a NON-REFUNDABLE
APPLICATION FEE of \$35.00	for each adult.				
I authorize ACS, Inc., Tenant	Data, Inc. and NV	V Choice Realty to pr	ocessing my re	ntal application and acc	ess my credit information
from the national repositori	es. I authorize my	references and cred	itors to release	to ACS, Inc., Tenant Da	ita, Inc. and NW Choice
Realty, all information neces	ssary to complete	said report and/or p	hotocopies of t	his report telephonicall	y and/or by fax and/or by
email, and request it be don	e by this manner	whenever possible. F	Furthermore, I	understand ACS, Inc., Te	enant Data, Inc. and NW
Choice Realty has my autho	rization to researc	th all public records f	or my criminal	and eviction history. I u	nderstand that NW Choice
Realty has a minimum quali	fication for gross i	ncome, which is equ	al to or greater	than 3 times the amou	nt of the advertised month
rent of the property the app	olicant is applying	to rent. I understand	that NW Choice	e Realty will review my	credit, eviction and crimin
history and authorize NW C	hoice Realty to acc	cept or deny my app	lication, based	on the discretion of the	one viewing the
application, to rent any prop	perty as a result of	f the credit, eviction	and criminal da	ta found on any or all o	f the reports.
Applicant		 Date	 Broker		 Date
πρριταιτι		Dutc	DIOKEI		Date
Applicant		– —————— Date	-		



### 4705 Lacey Blvd SE, Suite B, Lacey, WA 98503

Office: 360-350-4656 Fax: 360-350-4654 Direct: 360-701-9664 Email: bill@nwchoice.com

# **AUTHORIZATION TO RELEASE INFORMATION**

The tenants by the name of [applicant's name]:	
Hereby give authorization to the landlord by the name of [the name of applicant's	current landlord]:
Located at [applicant's current address]:	
to release all rental history concerning the names listed above, including rent pays cleanliness, and notices served to the tenant. This information shall be released to freviewing applications to rent. Information may be delivered to NW Choice Readelivery.	ment history, current rent status, o NW Choice Realty only for the purpose
Thank you for your time and cooperation.	
Tenant(s) Signature:	Date:
Broker Signature:	Date: