



**APPLICATION FOR RENT**

PLEASE CHECK ONE:  RAMBLER  TOWNHOUSE

\$25.00 FEE INDIVIDUAL

\$30.00 FEE MARRIED

TODAY'S DATE: \_\_\_\_\_ MOVE IN DATE: \_\_\_\_\_

***PERSONAL INFORMATION:***

PLEASE PRINT OR TYPE (An application must be filled out by each adult 18 years and over who will be occupying this unit)

NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ SS#: \_\_\_\_\_

DRIVERS LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME(S) OF PERSONS LIVING WITH YOU:  
\_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOW LONG AT PRESENT ADDRESS: \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

PRESENT LANDLORD NAME: \_\_\_\_\_ PRESENT LANDLORD PHONE: \_\_\_\_\_

FORMER ADDRESSES	HOW LONG	REASON FOR MOVING	LANDLORD NAME	LANDLORD PHONE

***EMPLOYMENT/FINANCIAL/STUDENT INFORMATION:***

EMPLOYER: \_\_\_\_\_ EMPLOYER ADDRESS: \_\_\_\_\_

YOUR POSITION: \_\_\_\_\_ SALARY: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

HOW LONG EMPLOYED: \_\_\_\_\_ MONTHLY AMOUNT: \_\_\_\_\_

CWU STUDENT:  YES  NO FINANCIAL AID?  YES  NO

QUARTERLY AWARD: \_\_\_\_\_

**CO-SIGNER'S INFORMATION**

CO-SIGNER'S NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

RELATIONSHIP TO APPLICANT: \_\_\_\_\_

SS#: \_\_\_\_\_ DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOW LONG AT CURRENT RESIDENCE: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

**CO-SIGNER'S EMPLOYMENT**

EMPLOYER: \_\_\_\_\_ EMPLOYER ADDRESS: \_\_\_\_\_

YOUR POSITION: \_\_\_\_\_ SALARY: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

PHONE: \_\_\_\_\_ HOW LONG EMPLOYED: \_\_\_\_\_ HOUSEHOLD INCOME: \_\_\_\_\_

**EMERGENCY CONTACT**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

**PERSONAL REFERENCES (2)**

1. NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

2. NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

**HISTORY:**

HAVE YOU EVER BEEN EVICTED:  YES  NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME?  YES  NO

HAVE YOU EVER HAD A JUDGEMENT OF ANY KIND ENTERED AGAINST YOU BY ANY COURT OF LAW?  YES  NO

IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS PLEASE EXPLAIN:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VEHICLE INFORMATION:**

VEHICLE MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_

LICENSE PLATE: \_\_\_\_\_ COLOR: \_\_\_\_\_

I HAVE A PHYSICAL OR MENTAL HANDICAP (EXPLAIN):

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I WILL NOT KEEP OR HARBOR PETS OF ANY KIND ON THE PREMISES WITHOUT THE PERMISSION OF THE LANDLORD. WARNING: ANY UNREGISTERED PET(S) WILL RESULT IN AN IMMEDIATE \$200.00 FINE.

**DISCLAIMER STATEMENT:**

Federal Fair Housing Laws shall be followed in the selection of a tenant. All applications received during any application period will be considered.

You are being charged \$25.00 (\$30.00 for a married couple) for screening this application. Screening this application includes calling present and former landlords, employer(s), financial institutions and/or credit reporting agencies. Your signature on this application for tenancy authorizes these individuals and/or agencies to release information for the purpose of evaluating the application.

Factual Data National is the agency used to provide credit and other information with regard to the applicant and application. If tenancy is denied on information provided by the above named agency, applicant(s) have the right to contact the agency by telephone at (970) 663-5700 or (800) 929-3400. To seek a review of the credit reports or other such information, the agency must be contacted directly. Timothy Park, LLC is not required or permitted to release or disclose information that is provided to us by the agency, except under the State and Federal Credit Reporting acts.

By signing below, I certify that I understand and agree that I acquire no rights in a unit until I sign an agreement in the form to be submitted to me and make a deposit to the unit I have selected for which deposit is consideration of the Landlord holding this unit for me. I hereby waive all rights to the return of this deposit and agree that said deposit shall be retained as credit check fee.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

CO-SIGNER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_