



# Application to Rent

Please use a separate form for each applicant 18 & older

Rental Address:		Rent: \$	
Landlord:	Phone:	Account:	
<b>APPLICANT INFORMATION (PLEASE USE A SEPARATE FORM FOR EACH APPLICANT 18 &amp; OLDER.)</b>			
Name:		License:	State Issued:
Date of birth:	SSN:	E-mail or Phone:	
<b>HOUSING</b>			
Current address:		Landlord:	E-mail or Phone:
Own	Rent	Monthly Amount: \$	How long?
Current address:		Landlord:	E-mail or Phone:
Own	Rent	Monthly Amount: \$	How long?
<b>EMPLOYMENT INFORMATION</b>			
Current employer:	State:	Position:	How long?
Monthly Wage:		Phone:	Fax:
Extra Income Sources:			Monthly Amount:
Self Employed:	Part-time	Full-time	N/A
Registered Business Name:			How long?
<b>ADDITIONAL INFORMATION</b>			
List Roommates (names/ages):			
List Children (names/ages):			
List Pets:			
Estimated FICO score:		Bankruptcy?	Year:
Bank:		Garnishments?	
List all vehicles, boats, RV's, etc.			
<b>QUESTIONNAIRE</b>			
Would a local credit-worthy person co-sign?		Are you a Section 8 renter?	
If required, would you restrict smoking to outside?		Are you a medical marijuana user?	
Have you seen the inside of the unit?		Do you have a service animal?	
Could you pay both first and last month's rent?		Are you a victim of violence?	
How long do you plan to stay here?		Preferred move-in date?	
When will you have the required deposit?		When will you have the initial rent payment?	
Smoker?		Marijuana User?	
The reason for moving?			
Ever been evicted or given notice to move? (explain)			
List all criminal convictions with year and county:			
Applicant Signature:			Date Signed:

Please complete in full. Unanswered, incomplete, or false items may be cause for disqualification or denial.

Please submit completed application with fee as directed by landlord or manager to avoid disqualification. Per RCW 59.18.257, your screening will entail public and business record reviews and consultations to include any of the following: criminal, eviction, bankruptcy, public records, credit, landlord conditions, and all reference resources. Applicant may dispute accuracy of consumer reports. If not posted, applicant may ask landlord for name/address/phone of screening resources (for screening report copy). Per RCW 49.60.040(24), a defined service animal is one "trained" to assist or accommodate a person's sensory, mental, physical disability. Letter documenting need for service animal, medical marijuana, or accommodation may be required from a doctor or qualified professional. Applicant acquires no rights to any rental unit until an approved lease or monthly rental agreement covering the applicant is signed by all affected parties.

**SUBMIT TO:** Email: [info@landlords.org](mailto:info@landlords.org)  
 Fax: (866) 876-3404

Text: (360) 489-6697  
 Online: [landlords.org](http://landlords.org)

