



Property Management

4152 Meridian Suite #229, Bellingham, WA 98226

Tele: 360.738.6800 Fax: 360.738.7018

**RENTAL APPLICATION** (Must be 18 to apply)

FOR OFFICE USE ONLY	
APPLICATION FEE PAID:	
DEPOSIT RECEIPT #	DEPOSIT AMOUNT \$
APPROVED	REJECTED

**PLEASE PROVIDE W/ APPLICATION:**  
 Application Fee: \$15 co-signer.  
 Copy of Driver's License, Passport or Picture ID.  
 Copy of Last Employer Paycheck Stub.

**PERSONAL INFORMATION**

Co-signer's Last Name	First	Middle	Birthdate	Soc. Sec. No.
CURRENT Phone Number			Driver's License Number & State	
Occupant's Names (1)	(2)	(3)		

**RESIDENCE HISTORY**

Present Address	City	State	Zip	Dates From/To:	<input type="checkbox"/> Own <input type="checkbox"/> Rent
PRESENT Landlord/Owner Name	Address			Phone	Monthly Pmt.
Previous Address	City	State	Zip	Dates From/To:	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Previous Landlord/Owner Name	Address			Phone	Monthly Pmt.

**EMPLOYMENT HISTORY**

PRESENT Employer	Supervisor's Name			How Long?		
Address	City	State	Zip	Phone	Position	Net Monthly Salary \$ Per Month
Additional Income (optional) Source	Amount \$			Per		

**OTHER INFORMATION**

Have you ever been convicted of a crime or felony?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, When?	What For?
Have you ever been evicted from a tenancy or requested to vacate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, When/From Who?	
Have you ever willfully and/or intentionally refused to pay rent when due?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, When/From Who?	
Have you ever declared Bankruptcy?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Any Additional Comments?	

The sum of \$ \_\_\_\_\_ is deposited herewith, on the understanding that it will be returned to you if this application is not approved. If the application is approved, you agree that the money deposited shall be applied to the Security Deposit required for the Unit. Should this application be canceled by you for reasons satisfactory to the company, the deposit shall be refunded, less amounts for expenses incurred or rents lost by the company as a result. Should this application be canceled by you for reason unsatisfactory to the company, the entire amount of the deposit will be forfeited. The non-refundable screening fee in the amount of \$15.00 has been paid to process this application.

**APPLICANT STATES AS FOLLOWS: I have read and understood the above paragraph regarding application of the initial Deposit. Initials Please [ \_\_\_\_\_ ]**

Full Security Deposit of \$ \_\_\_\_\_ must be paid PRIOR TO MOVE IN.  
 Application is for rental at \_\_\_\_\_ Unit \_\_\_\_\_  
 Rent for the Unit is \$ \_\_\_\_\_ per month. Upon approval of this application, you agree to sign a standard Rental Agreement.

YOU ARE HEREBY NOTIFIED that, consistent with the provisions of the Fair Credit Reporting Act, a credit investigation to verify the information supplied by you in the application form and otherwise establish creditworthiness will be initiated. APPLICANT STATES AS FOLLOWS: I/We represent that the statements made above are true and correct; I/We hereby authorize Caitac USA Corp Property Mgmt. to conduct a complete investigation, including but not limited to obtaining credit reports, public records, court records, along with rental, employment, bank and reference verifications. **I understand that false or misleading information may be grounds for denial of tenancy, or subsequent eviction.**

Dated \_\_\_\_\_ Co-signer: \_\_\_\_\_