

CO-TENANTS OTHER THAN SPOUSE USE SEPARATE APPLICATION

Address of Rental Property: _____ Unit # _____ Rent Amount _____
Applicant's Name: _____ SSN# _____
Date of Birth: _____ DL# _____ Tel# _____
Spouse: _____ SSN# _____
Date of Birth: _____ DL# _____ Tel# _____
Other Occupant's Name, Age & Relationship: _____

Complete Every Item On Application. Incomplete and/or Inaccurate Information May Result in Process Delay or Denial of Tenancy.

Table with 2 columns: CURRENT ADDRESS (Required Entry) and PRIOR ADDRESS (Required Entry). Rows include Street, City, State, Zip, Apt #, Name of Apts, How Long, Pymts / Rent Pd To, Amt, Landlord/Mgmt Co, Address, Tel#, and Rent/Own/Lease.

Current Employer: Tel# _____ Supervisor _____
Dept / Attached to _____ Occupation _____ Rank _____
Hire Date _____ Monthly Salary _____ Full Time _____ Part Time _____
Address _____ Suite _____ City _____ State/Zip _____

Prior Employer: Tel# _____
Term Date _____ Reason for leaving _____

Spouse's Employer: Tel# _____ Supervisor _____
Dept / Attached to _____ Occupation _____ Rank _____
Hire Date _____ Monthly Salary _____ Full Time _____ Part Time _____
Address _____ Suite _____ City _____ State/Zip _____

- Additional Income(Interest,Child Support,Etc)
Bank Acct# Branch Tel#
Pets? Yes No If yes, number, size, and type(s)
Have you ever used any other name? Yes No If yes, name(s)
Do you or any other occupant smoke: Yes No Have you or any prospective occupant ever been convicted of a crime: Yes No
Have you ever: Been evicted? Yes No Refused to pay rent? Yes No Filed Bankruptcy? Yes No
Are you a fulltime student? Yes No Do you require special accommodations?

Auto/Year/Make/Lic#: 1.) _____ 2.) _____
Local Contact Address Tel#
Nearest Relative Address Tel#

I understand I acquire no rights in an apartment until I sign this agreement and submit a holding fee in the amount of \$ _____. If my tenancy is approved and I sign an apartment rental agreement, this fee shall be credited to my first month's rent and/or security deposit. If my tenancy is approved but I DO NOT sign an apartment rental agreement, then this fee shall be forfeited to the landlord as liquidated damages for holding an apartment at _____. If my tenancy is not approved this fee shall be returned to me. In compliance with the Fair Credit Reporting Act, State and Federal laws, this is to inform you that an investigation involving the statements made on this application for tenancy is being initiated by ORCA Information. I/We certify that to the best of my/our knowledge all statements are "true & complete". I/We further authorize Orca Information, LLC to obtain credit reports, EMPLOYMENT REFERENCES, COURT, CRIMINAL & JUVENILE RECORDS, ARREST DETENTION INFORMATION and CHARACTER REFERENCES, GENERAL REPUTATION, MODE OF LIVING, and RENTAL REFERENCES as needed to verify all information put forth on this application. SCREENING FEE IS NON-REFUNDABLE.

Applicant's Signature _____ Date _____
Spouse's Signature _____ Date _____



Phone #: ()
Fax #: ()

Management Company:

Orca Information, LLC
Phone: 360-588-1633/800-341-0022
Fax: 360-588-1189/800-522-6722/866-268-0188

