

CHECK ONE: Commercial Killer Whale (\$68) Mini Report (\$33) Business Credit Report (\$58) Credit Report (\$18):

COMMERCIAL/CORPORATE RENTAL APPL	ICATION \$Non-Refundable Screening Fe				
Address of Rental Property	Move in Date				
	Tax ID Number				
	City				
StateZip	Tel#				
Owner/Principal Name	Social Security Number				
Complete every item on application. Incomplete and/or Inaccur	rate information may result in process delay or Denial of Tenancy.				
CURRENT ADDRESS INFORMATION	PREVIOUS ADDRESS INFORMATION				
Street	Street				
CityStateZip	City State Zip				
Suite #Name of Building	Suite #Name of Building				
How Long (Mo/Day/Yr)Fromto	How Long (Mo/Day/Yr)Fromto				
Pymts/Rent Pd toAmt\$	Pymts/Rent Pd toAmt\$				
Landlord/Management Company	Landlord/Management Company				
Address	Address				
Tel# Rent / Own / Lease	Tel# Rent / Own / Lease				
BANK RI	EFERENCES				
Name of BankName	e of Bank				
BranchTel#Branc					
	ount #				
	act Person				
TRADE REFERENCES	TRADE REFERENCES				
Company Name	Company Name				
BranchTel#	BranchTel#				
Account #	Account #				
Contact Person	Contact Person				
и о					
Has your Company done business under any other name? Yes Have you ever: Been evicted? Yes No Refused to pay re Have you ever been charged or convicted of a crime? Yes N	No If yes, name(s)				
tatements made on this application for tenancy are being initiated WA 98221. I certify that to the best of my knowledge all statemer nc. to obtain Credit Reports, Trade References, Bank Verificat Detention Information and Character References, General Reputation formation put forth in this application. SCREENING FEE IS NOT					
n addition, I confirm receipt of the lenant Selection	Policy (per WA State Fair Tenant Screening Act, 2012				

In addition, I confirm receipt of the **Tenant Selection Policy** (per WA State Fair Tenant Screening Act, 2012) from this landlord/property management BEFORE submitting this completed rental application and that I read, and understand my rights as described therein.

Applicant's Signature	Date
	THE DECISION TO LEASE/RENT REMAINS WITH THE PROPERTY MANAGER



CREDIT REPORT AUTHORIZATION

THE FOLLOWING MUST BE COMPLETED IN FULL

ADDRESS INFORMATION								
Applicant's Last Name	First	M.I.	Social Sec	urity Number	Date of Birth			
Present Address	Ci	City		State	Zip Code			
Day Phone ()		Fax (()					
Night Phone ()		Email:						
In compliance with the Face CREDIT REPORT will complete. I agree that a constitute invasion of priv WA 98221, 360-588-163 cy.	l be retrieved. I certify a-complete-investigativacy. I authorize ORC	that the fail A INFOR	icts set forth informatio MATION,	n in this applic non this app INC., PO Box	ation are true and dication will no x 277, Anacortes			
Signature of Applicant				Date				