

CHECK ONE: Commercial Lease Report _____ Business Credit Report _____

	Move in Date		
usiness Name			
Business Address	CityState/Zip:		
Contact Phone:	Contact E-mail:		
wner/Principal Name			
	Date of Birth:		
	accurate information may result in process delay or Denial of Tenancy		
CURRENT ADDRESS INFORMATION	PREVIOUS ADDRESS INFORMATION		
Street			
CityStateZip			
Suite #Name of Building			
How Long (Mo/Day/Yr)Fromtoto			
Pymts/Rent Pd toAmt\$			
Landlord/Management Company	Landlord/Management Company		
Address			
Tel# Rent / Own / Lease	Tel# Rent / Own / Lease		
	NK REFERENCES		
	Name of Bank		
	Branch Tel #		
	Account # Contact Person		
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TRADE REFERENCES	TRADE REFERENCES		
Company Name	Company Name		
BranchTel#	BranchTel#		
Account #	Account #		
Contact Person	Contact Person		
TRADE REFERENCES	TRADE REFERENCES		
Company Name	Company Name		
BranchTel#			
Branch Tel# Account #	Account #		

Tax documents with the above gross income listed _____ Copy of Profit and Loss print out for the year ___ Tax documents with your personal Net Income for the year listed _____ Copy of Current Business License ___

Please attach or send in the following with this completed application:

Company brochure and/or business advertisement

Addendum (A) to Application for Tenancy LETTER OF AUTHORIZATION

Revised 6/2018 to comply with Fair Tenant Screening Act

To whom it may concern,

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, Inc. to obtain Credit Reports, Credit References, Bank Verification, Bank 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 in this application. SCREENING FEE IS NON-REFUNDABLE.

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.

I also understand Orca Information's role is to provide background information to landlord/property manager. Orca Information does not make the decision to lease/rent or take any adverse action. Decision to lease/rent remains with the property manager/landlord.

You have the right to obtain a free copy of the consumer report in the event of a denial or other adverse action, and to dispute the accuracy of information appearing in the consumer report. The consumer reporting agency:

Orca Information, Inc. 120 E. George Hopper Road, Suite 108 Burlington, WA 98233 Phone 800-341-0022 Fax 800-522-6722

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Applicant's Name (please print)	VISA MASTI	ERCARD DISCOVE	CR ANNEX
	Card #		
Applicant's Signature	Expiration Date	:0	CVV Code:
Date of Authorization	Print Name on	Card	
Manager's/Assistant Manager's Signature	Signature of Car	rdholder	
	Card's Billing A	Address	
	City	State	Zip Code