



\$45 app fee per adult

2617 NE MLK Blvd - Portland, OR 97212 Phone(503)280-8786 Fax(503)281-1260 www.rmspdx.com

APPLICATION TO RENT

PLEASE COMPLETE				
Property Address:				
Monthly Rent: \$	Security Deposit: \$	Pet Deposit	:	
Requested lease length	Request	ted Move-In Date:		
PERSONAL INFORMATIC	N			
	—Telephone: ()	
	Middle Last			
S.S.#:BirthDate:	Emai	il Address:		
	CitY,:			
_ Since: W Current Landlord:	hy are you moving?Rent Amount:	Telephone: (
Previous Address:	City:	State:		Zip:
From:To:To:	Why did you move?Rent Amount:	Telenhone:	()	_
EMPLOYMENT/INCOME				
Main Employer/Income: Payroll/HR Department:		Telephone: (How long? _	_
-	Take home pay (per month):	\$	Full-time	Part-time
Additional Employer/Income:		How	long?	
Payroll/HR Department: Job Title:	Take home pay (per month)	Telephone: (): \$) Full-time	Part-time
ADDITIONAL INFORMAT				
#1 (Type, age, weight): [as Pet ever injured anyone or dam	Pet #2 (Type aged anything? _Y_N Has Pe	e, age, weight):et ever injured anyone	or damaged	anything? _Y_N
Oo you own any of the following: Pi	ano/Organ? _Y_N Water-filled furnit	ture? Y N Fis	h Tank or A	quarium? _Y_N
MEMBERS OF HOUSEHO	LD			
For purposes of identificat	ion only, please list names and either ages or dat	tes of birth of other per	son(s)to occu	py unit:

SEE NEXT PAGE FOR DISCLOSURE(S) AND REQUIRED SIGNATURES

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	v sign at property Ferred by friend		_The Oregonian/Oregonlive.com HotPads.com
_Ot	her, please explain: -		
Have		ing —	
	No, I am applying 10.	r this property without the b	enem of a viewing.
APPL	ICANT'S SCREENIN	NG CHARGE DISCLOS	URE(S)
1)	Owner/Agent may obt a) credit history inclu		credit report which generally consists of:
	b) public records, incaccounts;	cluding but not limited to	judgments, liens, evictions, and status of collection
	c) information verifiedd) criminal records;	cation;	
	· · · · · · · · · · · · · · · · · · ·	s and credit rulings; come verification.	
2)		Owner/Agent does not sc	licant Screening Charge, \$45.00, none of which is reen the applicant. Application valid for up to two weeks
screeni result i make a	ng service or credit rep n denial of tenancy. I	porting agency. I am awa certify the above informa	any information provided to the Owner/Agent by a re that an incomplete application may cause delays or tion is correct and complete and hereby authorize you to enancy and credit standing (including, but not limited to
IfOwn	er/Agent is requiring p	ayment of an applicant so t's Screening Guidelines.	reening charge, applicant acknowledges receiving a copy
Applica	ant		Date
		See Next Page for	Payment Information



Rental Management Services accepts cash, check, money order or VISA/Mastercard for payment of the \$45/person application fee.

Payment of the application fee must be received by our office before your application processing begins.

Cash, check or money orders may be delivered to our office.

Security Code: _____

VISA/Mastercard payments may be faxed to 503-281-1260 or scanned/emailed to <u>michele@rmspdx.com</u>. Your payment will be matched with your application to begin the screening process.

Please indicate your method of payment and number of applications below: Name: Rental Property Address: \$45 x (# of applications) = \$ Cash Check · \$45 x _____(# of applications) = \$_____ ____Money Order 45 x of applications) = \$ Visa/MasterCard (please sign below and provide credit card information below) 45x (#of applications) = \$ I authorize Rental Management to charge my credit card (Signature) For Office Use Only: Amount Date Auth # Please note: RMS will destroy this information after your credit card has been charged and an authorization code received. Name on Card (please print): Card#: Exp Date: / ___ Billing Zip Code: ______