T.J. GUYER INC. APPLICATION

EACH ADULT FILLS OUT SEPARATE APPLICATION/ USE DARK BLUE INK ONLY!!!

Address of Rental Property:	Unit #	Rent Amount		
Applicant's Name (First, Middle, Last):				
Date of Birth: SSN#:	Email Address:			
Date of Birth: SSN#: Tel#	Cell#			
Other Occupant's Name, Age & Relationship				
If any of the above noted occupants are currently married or separ	ated but not living with their spouse, plo	ease note yes or no: 🔲 Yes 🗀 No		
Complete Every Item on Application. Incomplete and/or Inacc	urate Information May Result in Pro-	cess Delay or Denial of Tenancy.		
CURRENT ADDRESS	PRIOR ADDRESS			
Address:	Address:			
City:StateZip	City: State	Zip		
Apt#Name of Apts How long (Mo/Day/Yr) FromTo	Apt#Name of Apts How long (Mo/Day/Yr) From	To		
Pymts/Rent Pd toAmt	Pymts/Rent Pd to	10		
Landlord/Mgmt Co.	Pymts/Rent Pd toAmt Landlord/Mgmt. Co			
Address:	Address:Rei			
Renting from a family member/friend? Yes \(\square\) No \(\square\)				
Renting from a family member/friend: 1es - No -	Renting from a family member/f	riend? Yes 🗆 No 🗆		
Current Employer	Tel#	Supervisor		
Dept:Occupation		Rank		
Hire DateMonthly Salary	Full Time	Part Time		
Address Suite	eCity	State/Zip		
2nd Employer	Tel#Supervisor			
Hire DateMonthly Salary	Full Time	Part Time		
Address Suit	teCity	State/Zip		
Additional Income (Interest, Child Support, Etc.)				
Pets? Yes \(\) No \(\) If yes, number, size, type(s):	Pets? Yes □ No □ If yes, number, size, type(s): Disability status and require special accommodation: Service Animal? Yes □ No □			
Disability status and require special accommodation.				
Auto/Year/Make/Lic#: 1.)	2.)			
Local ContactAddress	· · · · · · · · · · · · · · · · · · ·			
Nearest RelativeAddress	Tel#			
Emergency ContactAddress	Tel#			
HAVE YOU OR ANY HOUSEHOULD MEMBER: Ever been evicted or defaulted on any obligation of a rental agr				
Ever used any other name(s)? Yes \square No \square If yes, list name(s)				
Are you or any other household member a Registered or Unreg				
Ever had bedbugs or any other infestation? Yes \square No \square If ye	s, what type of infestation:			
Do you or any other household member smoke? Yes \square No \square				
Have you or any other household member filed bankruptcy? Yes □ No □ If yes, when?				
Convicted of a Crime? Yes No If yes, name of crime				
Approximate date of conviction:				

Addendum (A) to Application for Tenancy

LETTER OF AUTHORIZATION

Revised 11/2020

To Whom It May Concern:

In compliance with the Fair Credit Reporting Act, State and Federal laws, this is to inform you and your household members that an investigation involving the statements made on this application for tenancy are being initiated by ORCA Information, Inc., 120 E. George Hopper Rd Ste. 108 Burlington, WA 98233, 360-588-1633. I certify that to the best of my knowledge all statements are "true and complete". I further authorize ORCA Information, Inc. to obtain CREDIT REPORTS, EMPLOYMENT REFERENCES (including verifying salary), COURT RECORDS, and CHARACTER REFERENCES, MODE OF LIVING, and RENTAL REFERENCES as needed to verify all information put forth on this application and otherwise available regarding all applicants identified on this application (for juvenile occupants, the undersigned parent/guardian authorizes the above-information to be obtained on their behalf).

Furthermore I warrant the accuracy of all information contained on this rental application, including that relating to the other intended occupants of the subject property. I understand and agree that if subsequently a determination is made that I provided false or inaccurate information on the rental application it is a breach of the terms of any rental agreement signed based on that information and Owner and/or his/her agent may take legal action to terminate said Agreement.

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.

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

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.

Applicant's Name (please print)
Applicant's Signature
Date of Authorization
Manager's/Assistant Manager's Signature

T.J. Guyer, Inc.

Addendum to Application for Tenancy

Applicant Acknowledgement that Available Property Date is Approximate Only

Most of our advertised properties are currently occupied. In estimating the available dates, we can provide approximate dates only. We are unable to provide firm available dates due to some factors which are beyond our control. These factors include, but are not limited to: the current resident vacating by the date they provided us, unknown maintenance problems which may be discovered at the move out inspection and company business hours (closed evenings, weekends and holidays). We will do our best to ready the property once it becomes vacant and notify you with the updated approximate available date.

I fully understand that the available date listed on the property for which I have applied is an approximate date only and that T.J. Guyer cannot guarantee a date that the property will be move-in ready. With this understanding, I freely choose to apply for this property.

Applicant's Signature	Date