

Application for Tenancy

Associated/DayBreak Property Management

Email Completed Application AND Copy of ID to rentals@adpmyakima.com

Phone: 509-452-3848 Fax: 509-853-7370 Website: www.adpmyakima.com

There is a \$40 non-refundable processing fee per applicant AFTER VIEWING

Property Applying for: _____
Desired Move-in Date: _____ Application Date: _____

Personal Information

- Full Legal Name: _____
- Date of Birth: _____ SSN/ITIN: _____
- Phone Number: _____ Email: _____
- Total Number of Adult Occupants: _____ Total Number of Occupants under 18: _____
- Names and ages of Additional Occupants: _____

- Do you have animals? [] Yes [] No If yes, type/breed: _____
- Animal Age: _____ Spayed/Neutered: _____
- Driver's License #: _____ State: _____
- Vehicle (Make/Model/Plate): _____
- Emergency Contact Name: _____ Phone: _____

Employment & Income

- Current Employer: _____ Job Title: _____
 - Start Date: _____ Payroll Contact: _____
 - Employer/Payroll Phone: _____
- Monthly Gross Income: \$ _____ (require proof after viewing: pay stubs, W-2, etc.)
- Other Sources of Income/Assistance: _____ Amount: \$ _____

Rental History

- Current Address: _____
 - Dates of Residency: _____ to _____ Monthly Rent: \$ _____
 - Reason for Moving: _____ Is rent current? _____
 - Landlord Name & Phone: _____
 - Have you given proper notice? _____
- Previous Address: _____
 - Dates of Residency: _____ to _____ Monthly Rent: \$ _____
 - Landlord name and phone number: _____
 - Was your rent current? _____ Was proper notice given? _____
 - Did you get all of your deposit back? _____
 - (If you answered NO to any of the above, explain the circumstances below.)

 - Have you ever been evicted/asked to move by a landlord or manager? If yes, explain below

Background Information

- Have you ever been evicted? [] Yes [] No If yes, _____
- Have you ever filed for bankruptcy? [] Yes [] No If yes, _____
- Have you ever been convicted of a felony? [] Yes [] No If yes, _____

6. Authorization & Signature

APPLICANT'S SIGNATURE HEREBY AUTHORIZES CREDIT & REFERENCE CHECKS AND IS MY EXPRESS, WRITTEN CONSENT FOR ADPM AND ANY OF ITS AGENTS, SUCCESSORS OR ASSIGNEES, ACTING ON ITS BEHALF TO COMMUNICATE WITH ME REGARDING MY ACCOUNT(S) THROUGH VARIOUS MEANS OF COMMUNICATION INCLUDING, BUT NOT LIMITED TO 1) ANY CELL PHONE NUMBER; 2) ANY LANDLINE PHONE NUMBER; 3) ANY TEXT OR OTHER SIMILAR ELECTRONIC NUMBER THAT I PROVIDE. THIS EXPRESS CONSENT IS GIVEN IN ORDER TO PERMIT ADPM TO MORE EASILY COMMUNICATE WITH ME REGARDING ANY ISSUE, INCLUDING FOR PURPOSES OF BILLING AND COLLECTION OF ANY BALANCES DUE. A FALSE/WILLFULLY OMITTED STATEMENT HERE IN WILL BE CAUSE TO CANCEL AGREEMENT AT LANDLORDS OPTION.

SIGN: X _____ DATE _____