



APPLICATION TO RENT (OR/WA) (On-Site.com)

Application ___ of ___

Community Name: _____ Date: _____ Marketing Source: _____
 Address: _____ Apt. No. _____
 Visual proof of photo ID: _____ Rent: _____ Move-in Date: _____ Apt. Size _____
(INITIAL)
 Comments: _____

Thank you for showing an interest in our community. Help us speed your application by giving this information completely and accurately. PLEASE PRINT.

Applicant Name: _____ Date of Birth: _____
 E-mail Address: _____ Daytime Phone: (____) _____
 Driver's License No.: _____ State: _____ S.S.N.: _____ - _____ - _____
 Names and dates of birth of occupants (other than Applicant): _____

Present Address: _____ Phone: (____) _____
STREET CITY, STATE ZIP

Apartment Name or Landlord: _____ Phone: (____) _____
(IF YOU OWNED PROPERTY, PLEASE INDICATE FINANCE COMPANY)
 Dates of Occupancy: _____ To _____ Monthly Rent or Payment \$ _____
(MONTH, YEAR) (MONTH, YEAR)

Previous Address: _____ Phone: (____) _____
STREET CITY, STATE ZIP

Apartment Name or Landlord: _____ Phone: (____) _____
(IF YOU OWNED PROPERTY, PLEASE INDICATE FINANCE COMPANY)
 Dates of Occupancy: _____ To _____ Monthly Rent or Payment \$ _____
(MONTH, YEAR) (MONTH, YEAR)

Present Employer: _____ Position: _____
 Employer's Address: _____ Phone: (____) _____ Net Mo. Income: _____
STREET CITY, STATE ZIP

Supervisor: _____ Employed Since: _____

Previous Employer: _____ Position: _____
 Employer's Address: _____ Phone: (____) _____ Net Mo. Income: _____
STREET CITY, STATE ZIP

Supervisor: _____ Employed from: _____ to _____

Other Income: \$ _____ **Source:** _____

Total Number of Autos: _____ Year/Make/Color of Auto: _____ Tag No. & State: _____

Year/Make/Color of Auto: _____ Tag No. & State: _____

Satellite Dish? Y N Waterbed? Y N Aquarium of 10 gallons or more? Y N

Pet? Y N Pet Type/Weight: _____ / _____ Do you have renters insurance? Y N List company: _____

Emergency Contact: _____ Relationship: _____

Address: _____ Phone: (____) _____
STREET CITY, STATE ZIP

Have you ever been or are you currently being evicted? Yes No

Have you ever filed for Bankruptcy? Yes No

Have you given the landlord legal notice where you now live? Yes No

Have you or any other person who will be occupying the unit pled guilty or no contest to any felony or misdemeanor? Yes No

Have you or any other person who will be occupying the unit ever been convicted of (or have an open/pending case concerning) a felony or misdemeanor involving theft, dishonesty, assault, intimidation, drug-related, sexual or weapons charge? Yes No

(Any questions left unanswered will be considered a "no" response).

ALL RENTS ARE DUE AND PAYABLE ON THE FIRST OF EACH MONTH IN ADVANCE FOR THE FULL MONTH.

APPLICANT SCREENING CHARGE RECEIPT: I (We) have read and understand CTL's Rental Screening Criteria, and agree to have CTL Management, Inc. retain \$_____ as a non-refundable payment for the Applicant Screening Charge. Owner/Agent has charged a screening charge as set forth above. Landlord may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the applicant's credit, income, employment, rental history, criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 609(1)(b) of the Fair Credit Reporting Act, and a written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation. The name and address of the screening company or credit agency is On-Site.com, 105 Fremont Avenue, Suite D, Los Altos, CA 94022 Phone: 1-866-266-7483

OR only: All monies received prior to signing your rental agreement will be handled in accordance with ORS 90.255. If the application is approved, applicant will have 24 hours from the time of notification to either execute a rental agreement and make all deposits required there under or make a deposit to hold the unit and execute a deposit reservation receipt, which will provide for the forfeiture of the deposit if applicants fail to occupy the unit. If applicants fail to timely take the steps required above, they will be deemed to have refused the unit and the next application for the unit will be processed.

WA only: A deposit of \$_____ has been received in addition to the Applicant Screening Charge to hold said apartment. Should your application be denied, all monies except the Applicant Screening Charge will be returned. Should you be accepted and fail to move in, all monies will be retained by CTL Management, Inc.

(SEE ALSO: _____)

Applicant hereby certifies that the information above is true and correct and hereby authorizes landlord/agent to do a credit check and make any inquiries deemed necessary to evaluate the application for tenancy and credit standing. Applicant understands and accepts that any information provided that is incomplete, inaccurate, or falsified is grounds for denial of the application. If any information supplied on this application is later found to be false, this is grounds for termination of tenancy.

APPLICANT SIGNATURE: _____ **Date:** _____

CTL REPRESENTATIVE SIGNATURE: _____ **Date:** _____