Each adult applicant must submit a separate application.

**ALASKA RENTAL APPLICATION**

Application Fee: $[AMOUNT]

Property Address: [PROPERTY ADDRESS]

Monthly Rent: $[MONTHLY RENT]

Landlord’s Name: [LANDLORD'S NAME]

Landlord’s Phone Number: [LANDLORD'S NUMBER]

Landlord’s E-mail Address: [LANDLORD'S E-MAIL]

Are you co-applying with anyone else?  Yes  No

If yes, enter their names: [NAME(S)]

Date: [DATE]

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| **APPLICANT INFORMATION** |

Applicant’s Full Name: [APPLICANT'S FULL NAME]

Date of Birth: [DATE OF BIRTH] SSN: [SSN #] Driver’s License Number: [DL #]

Phone Number: [PHONE #]

E-mail Address: [E-MAIL]

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| **CURRENT RESIDENCE** |

Property Address: [PROPERTY ADDRESS]

Monthly Rent: $[MONTHLY RENT]

Lease Start: [START DATE] Lease End: [END DATE]

Reason for Moving: [REASON FOR MOVING]

Landlord’s Name: [LANDLORD'S NAME]

Landlord’s Phone: [LANDLORD'S PHONE] Landlord’s E-mail Address: [LANDLORD'S E-MAIL]

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| **PREVIOUS RESIDENCE** |

Property Address: [PROPERTY ADDRESS]

Monthly Rent: $[MONTHLY RENT]

Lease Start: [START DATE] Lease End: [END DATE]

Reason for Moving: [REASON FOR MOVING]

Landlord’s Name: [LANDLORD'S NAME]

Landlord’s Phone: [LANDLORD'S PHONE] Landlord’s E-mail Address: [LANDLORD'S E-MAIL]

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| **EMPLOYMENT** |

Occupation: [OCCUPATION]

Employer: [EMPLOYER'S NAME]

Start Date: [START DATE]

Gross Monthly Income: $[AMOUNT]

Supervisor’s Name: [SUPERVISOR'S NAME]

Supervisor’s Phone: [PHONE #] Supervisor’s E-mail Address: [SUPERVISOR'S E-MAIL]

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| **OCCUPANCY** |

Will there be any minor dependents living with you?  Yes  No

If yes, describe: [DESCRIPTION]

Do you have any pets?  Yes  No

If yes, describe: [DESCRIPTION]

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| **PUBLIC RECORDS** |

**Eviction**. Have you ever been evicted or a defendant in an eviction action?  Yes  No

If yes, describe: [DESCRIBE EVICTION]

**Bankruptcy**. Have you ever filed, or are you in the process of filing bankruptcy?  Yes  No

If yes, describe: [DESCRIBE BANKRUPTCY]

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| **REFERENCES** |

Full Name: [REFERENCE 1 FULL NAME]

Relationship to you: [RELATIONSHIP]

Phone Number: [PHONE #]

E-mail Address: [E-MAIL ADDRESS]

Full Name: [REFERENCE 2 FULL NAME]

Relationship to you: [RELATIONSHIP]

Phone Number: [PHONE #]

E-mail Address: [E-MAIL ADDRESS]

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| **CONSENT & ACKNOWLEDGMENT** |

I hereby certify that I am at least 18 years of age and that all information given on this application is true and correct. I authorize the Landlord and its agents to obtain an investigative consumer credit report including but not limited to credit history, OFAC search, landlord/tenant court record search, criminal record search, and registered sex offender search. I authorize the release of information from previous or current landlords, employers, bank representatives, and personal references. I agree to furnish additional credit and/or personal references upon request. I understand incomplete or incorrect information provided in this application may cause a delay in processing which may result in denial of tenancy. This investigation is for resident screening purposes only and is strictly confidential.

Important information about your rights under the Fair Credit Reporting Act:

* You have a right to request disclosure of the nature and scope of the investigation.
* You must be told if information in your file has been used against you.
* You have a right to know what is in your file, and this disclosure may be free.
* You have the right to ask for a credit score (there may be a fee for this service).
* You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete, or unverifiable information.

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C. 20580.

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These reports may contain information on my character, general reputation, personal characteristics, and mode of living.

**Applicant’s Signature**: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/) Date: [SIGNING DATE]

Print Name: [PRINT NAME]