

APPLICATION FOR TENANCY (SEATTLE)

SHADED SECTIONS TO BE C		ED BY OWNE	R/AGENT	_					
Owner/Agent Name:				Date/time completed application received:					
Phone:									
RHAWA Screening Package:	Basic	Premium	Backgrou	nd Other_					
APPLICANT INFORMATION	۷:								
Last Name:		Fi	irst Name: _			Middle:			
Phone#:		Em	nail:						
CurrentAddress:				City:		State:	Zip:		
Social Security/ITIN#:			Date of Birth	n:	_ Government I	ssued ID#:			
OWNER/AGENT: Visual Proof	Of: Driv	er's License	State ID	SS Card	Other				
OCCUPANCY INFORMATIO	N								
List all persons in addition to you separate rental applications and			sidents, inclu	ding a Date Of	Birth (DOB) for	each. All persons 1	8 or older must complete		
Resident:		DOB:_		_ Resident: _			DOB:		
Resident:		DOB:		Resident: _			DOB:		
Are you, or any other resident,	, a smokerî	?	Yes	No					
Do you have renter's insurance	e?		Yes	No					
Do you have a waterbed or aq	uarium ove	er 20 gallons?	Yes	No					
Will animals reside in the unit?	,		Yes	No If yes, how	w many?	Weight(s)			
			Type(s)		Breed	l(s)	_		
PERSONAL BACKGROUNI	D HISTOR	Y							
Landlord is prohibited from required conviction record, criminal historiand subject to the exclusions an based on eviction history occurriand the Seattle Office for Civil R	ry, except f nd legal requiring d	or registry infouirements in Sor within six mo	ormation as of SMC 14.09.11 on the after the	described in SM I5. The landlord e end of the civi	AC 14.09.025.A.d is prohibited from the control of	.3, SMC 14.09.025 om taking an advers oclaimed by Mayor [A.4, SMC 14.09.025.A.5 se action against a tenant		
Owner/Agent requires sex offer	nder screer	ning: Yes	No						
FINANCIAL HISTORY									
Current monthly expenses/finan	icial obligat	ions: Car:	\$	Loan:	\$	Credit Card	s: \$		
Other (describe):									
Have you ever filed for bankrupt									
PREVIOUS RESIDENCE HIS	STORY								
CurrentAddress:				City:		State:	Zip:		
Landlord Name:									
Previous Address:									
Landlord Name:									
Previous Address:				City:		State:	Zip:		
Landlord Name:	Land	dlord Phone#:		Dates of	Occupancy:		Rent \$		

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PREVIOUS RESID	DENCE HISTORY (C	ONTINUED)				
Have you given notice	e of termination of tena	ancy to your current lan	idlord? Yes	No For what date	e are you seeking occupancy?	
Have you ever been	served an unlawful de	tainer notice or been e	evicted? Yes	No		
If yes, include mo	onth/yr and address: _					
Have you ever receiv	ed a notice to pay rer	nt or vacate and/or ano	ther unlawful deteine	er notice from a la	ndlord? Yes No	
If yes, describe c	ircumstances:					
INCOME HISTOR	Y - LIST EMPLOYMI	ENT AND/OR OTHER	R SOURCES OF IN	COME		
Organization (current):			Position:		Monthly: \$	
Date Range:	te Range: Contact Name (HR/Supervisor):				Phone:	
Other current income	e (attach documentation	on/verification):			Monthly: \$	
Organization (previous):			Position:		Monthly: \$	
Date Range:		_ Contact Name (HR/S	Supervisor):	Phone:		
Other previous incom	ne (attach documentat	ion/verification):			Monthly: \$	
VEHICLES						
	(car, boat, trailer, RV, ned to park on premise		would like to keep or	n the property. Wr	itten permission separate from this appli-	
Туре:	Make:	Model:	Year:	Color:	Plate#/State:	
Туре:	Make:	Model:	Year:	Color:	Plate#/State:	
Туре:	Make:	Model:	Year:	Color:	Plate#/State:	
EMERGENCY/PE	RSONAL CONTACT					
Name:	ne:		Relationship:		Phone#:	
Name:			Relationship:		Phone#:	
ACKNOWLEDGE	MENT					
this application for te nial of tenancy and/o tenancy. If you are o within 60 days of den an agreement to ren Credit Report and yo	nancy will be initiated or forfeiture of rental or leclined due to the co ial. You also have the t and all applications u wish to dispute any ng Association of WA -	. Any false, fraudulent r lease agreement. An nsumer report, you ma right to dispute the acc must be approved. Dis or all information on yo	t or misleading inform incomplete applicat by obtain a free copy curacy of the report a sputes: If the screen our credit report, cor	nation provided or ion causes delay of your credit rep and/or add a consu ing of your applica atact Rental Housi	gation involving the statements made or in the application may be grounds for de- in processing and may result in denial of port from the bureau it was obtained from umer statement to the report. This is NOT ation for tenancy included RHAWA's Ful ing Association to file the dispute on your WA 98106; Phone: (206) 283-0816; Email	
A non-refundable pro	cessing fee of \$	is required per a	applicant for non-ref	undable tenant sc	reening fees.	
ifications or renewals civil and/or criminal r	to verify the informati ecords, verifying sour	ion provided on the app	plication including, b al history. I understa	ut not limited to, o	cy and again upon any future lease mod- btaining credit reports, character reports dulent or misleading information may be	
	-	ing been notified in wri ult in denial of the appl			formation will be accessed to conduct the 7.	
Applicant Name:		Signa	ature:		Date:	