



# MONNIE MANAGEMENT RENTAL APPLICATION (Each ADULT APPLICANT)

Management Company <b>Monnie Management LLC</b>	Time application received:	Contact: <b>Silke Monnie</b>	Telephone: <b>503-736-9121</b>	
Date unit available	Monthly rent: initials:	Security deposit: initials:	Fax: <b>503-736-1398</b>	
<b>Application fee: \$ 30</b>		Street of property:		

## APPLICANT INFORMATION

APPLICANT Last Name	First	Middle	D.O.B.	Social Security #	Drivers License #
Phone #(s)				Email	
Roommate(s) Name(s)				Desired Move-in Date	

## CURRENT RESIDENCE

CURRENT Address	Apt #	City	State	Zip	Rent <input type="checkbox"/> Own <input type="checkbox"/>	Move-in date	Move-out date	Monthly Rent \$
LANDLORD Name	City		State	Zip	Landlord day phone		Landlord evening phone	
Reason for vacating:				List roommates:				
Have you given legal notice at your current residence? Yes <input type="checkbox"/> No <input type="checkbox"/>								

## PREVIOUS RESIDENCE

PREVIOUS Address	Apt #	City	State	Zip	Rent <input type="checkbox"/> Own <input type="checkbox"/>	Move-in date	Move-out date	Monthly Rent \$
LANDLORD Name	City		State	Zip	Landlord day phone		Landlord evening phone	
Reason for vacating:				List roommates:				

## EMPLOYMENT

APPLICANT CURRENT Employer	Position	Phone	Supervisor Name	Salary/mo.	Month/year of hire
Additional Sources of Income Per Month: (Include verification or contact info)					

## ADDITIONAL INFORMATION

Have you or any person who will occupy the unit ever been convicted, plead guilty, no-contest or have current pending charges to Any felony or misdemeanor? No <input type="checkbox"/> Yes <input type="checkbox"/> Describe:		Have you ever been evicted? No <input type="checkbox"/> Yes <input type="checkbox"/>	Pets:
EMERGENCY CONTACT	Relationship	Address	Phone
VEHICLES (Make, Model, Color, License/State)			

## FEE DISCLOSURE

Application: \$30 per adult	Late rent: \$50	Lease break fee: 1 month's rent	NFS check fee: \$25 plus bank charges
Non-compliance fee: \$25		Smoke/CO alarm tampering: \$250	

### GOOD FAITH ESTIMATE

Approximate number of units currently available, or which will in the foreseeable future be available, of the size and in the area requested by applicant: \_\_\_\_\_ unit(s).  
 Approximate number of applications previously accepted and currently under consideration for those units: \_\_\_\_\_ application(s).  
 If the blanks above are not filled in, then there is at least one unit available and there are no applications ahead of yours currently under consideration.

I certify that the above information is correct and complete and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I understand that giving incomplete or false information is grounds for rejection of this application. If any information supplied on this application is later found to be false, this is grounds for termination of tenancy. Owner/Agent has charged a screening charge as set forth above. Applicant screening entails the checking of the applicant's credit, rental history, employment history, public records and other criteria for residency. The applicant has the right to dispute the accuracy of any information provided to the owner/agent by the screening service or credit reporting agency. Applicant's copy of this signed application shall be the receipt for the screening charge. The screening service is Pacific Screening Inc., P.O. Box 25582, Portland, OR 97298 (503) 297-1941. If the applicant is approved, applicants will have 24 hours from the time of notification to either execute a rental agreement and make all deposits required thereunder or make a deposit to execute a rental agreement which will provide for the forfeiture of the deposit if applicants fail to execute the rental agreement. 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. Owner / Agent shall have no liability to applicant until such time as a rental agreement is signed by both parties. Applicant acknowledges receipt of a copy of the Criteria for Residency. The information contained in this application is true and complete.

Signed \_\_\_\_\_ (Applicant) Dated \_\_\_\_\_  
 Signed \_\_\_\_\_ (Agent for Owner) Dated \_\_\_\_\_