

APPLICATION FOR TENANCY

Phone Number to Reach You: _____ Alt # _____

Date occupancy desired _____ Address of unit _____ Date _____

Name _____ Birth Date _____ SSN _____ Driver License # _____

Current Employer _____ Wage _____ Position _____ Hours/Day _____

Employer Address _____ Phone # _____ Supervisor _____

Spouse Name _____ Birth Date _____ SSN _____ Driver License # _____

Current Employer _____ Wage _____ Position _____ Hours/Day _____

If you receive DSHS, Unemployment or Social Security benefits, please bring a copy the of amount(s) you receive

Employer Address _____ Phone # _____ Supervisor _____

Current Address _____ Manager's Name & Phone # _____
Date From _____ To _____

Previous Address _____ Manager's Name & Phone # _____
Date From _____ To _____

Other Persons to Occupy the Unit (Roommates must fill out a separate application; unless married)

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Nearest Relative, other than spouse, to be notified in case of Emergency

Name _____ Address _____ Phone # _____

PETS Kind/Breed _____ How Many _____ Kind/Breed _____ How Many _____

VEHICLES Make _____ Year _____ License Plate # _____

Make _____ Year _____ License Plate # _____

Credit References (List Open or Closed)

I understand I acquire no rights in a unit until I sign a Rental Agreement and pay the first month's rent plus any deposits in advance. In consideration of the landlord holding this unit for me, I hereby waive my rights to the return of \$ _____ (Initial & Date _____) and the same shall be retained as liquidation damages in the event I do not choose to enter the Agreement applied for herein. In the event of said tenancy is not accepted, or if possession of premises cannot be given, deposit shall be returned to applicant, allowing sufficient time for bank clearance of check. The application and contents thereof are considered a part of my Rental Agreement.

Signature _____ Date _____

Signature _____ Date _____

GARY MANN REAL ESTATE

305 E. Third Avenue, Moses Lake WA 98837

Phone: 509.765.3463 Fax 509.766.2905

Email: garymannre@gmail.com





AUTHORIZATION FORM

I, _____ give my permission to release any and all information regarding my current & previous rental history and my current employment. If you have any questions, please contact Property Management at (509) 765-3463.

Name (Print): _____

Signature: _____

Date: _____