

Gary Mann Real Estate
305 East Third Avenue
Moses Lake, WA 98837
Phone: (509) 765-3463
Fax: (509) 766-2905

Number where we can reach you: _____

Date of Occupancy Desired: _____ Desired Address: _____ Unit# _____
Name: _____ Age: _____ Social Security #: _____
Drivers License# _____

Spouse's Name: _____ Age: _____ Social Security #: _____
Drivers License#: _____

Present Address: _____ Phone# _____
Lived There From: _____ to _____ Mgrs Name _____
Manager's Phone# _____

Previous Address: _____ Phone# _____
Lived There From: _____ to _____ Mgrs Name _____
Manager's Phone# _____

Other persons to occupy unit (**ROOMMATES TO FILL OUT SEPARATE APPLICATION**)

Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____

Current Employment:

Current Employer: _____ Phone#: _____
Address: _____ Title/Position _____
Salary: _____ FT/PT _____ Supervisor: _____

Previous Employer: _____ Phone#: _____
Address: _____ Supervisor: _____

Spouse's Employer: _____ Phone#: _____
Salary: _____ FT/PT _____ Supervisor: _____

Automobiles:

Make: _____ Year: _____ License # _____
Make: _____ Year: _____ License # _____

Credit References: (List Open & Closed)

1. _____ 2. _____
3. _____ 4. _____

Nearest Relative, other than spouse, not living with you to be notified in an EMERGENCY

Name: _____ Address: _____ Phone: _____

I understand I acquire no rights in an apartment/house until I sign a Rental Agreement in the form submitted to me, and pay the first month's rent in advance. In consideration of the Landlord holding the apartment/house for me, I hereby waive my rights to the return amount of \$_____ and said deposit shall be retained as liquidated damages in the event I do not choose to enter into the Agreement applied herein. In the event the 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 the contents thereof are considered a part of my Rental Agreement.

Date: _____ Applicant Signature: _____
Applicant Signature: _____



AUTHORIZATION

I, _____ give my permission to release **any and all information** regarding my rental history at _____ and my current employment history. If you have any questions, please contact Property Management at (509) 765.3463.

Name (Print): _____

Signature: _____

Dated: _____