



541.388.1382  
2524 NE Division St. #1 Bend, OR 97703

### APPLICATION SCREENING GUIDELINES

Please complete the entire application and return to our office, with the \$40.00 application screening charge, PER PERSON 18 years and over. This charge must be paid in cash or money order. Once the application is approved, we require immediate payment of the deposit to guarantee and hold the unit. If the deposit is not received within 24 hours of being approved, the application will be taken out of line.

NO SMOKING OR VAPING IS ALLOWED IN THE UNITS OR ON THE PROPERTY.

#### APPLICATION PROCESS

- We offer application forms to anyone who inquires about the rental.
- We review completed applications in the order we receive them.
- We may require up to 3-5 business days to verify information on the application.

#### SCREENING GUIDELINES

##### Complete Application

- We will not review incomplete applications. Applications submitted without the screening charge will be incomplete and will not be processed.
- We will accept the first qualified applicant(s).
- Applicants must show a government issued photo identification card.

##### Prior Rental History

- Favorable rental history of 2 years must be verified from unbiased/unrelated sources.
- Applicants must provide us with the information necessary to contact past landlords. We reserve the right to deny any application if, after making a good faith effort, we are unable to verify prior rental history.
- No evictions within the past 5 years. We do not consider evictions which resulted in a dismissal or a general judgement for the applicant.

##### Income/Resources

- Consistent net household income shall be at least 3 times the monthly rent. (excluding utilities)
- Income must be verifiable through current pay stubs; award letters for Social Security, alimony, child support, welfare, utility or housing assistance self-employed, you must provide tax returns from within the last two years for proof of income. Attach with application. Length of employment will be considered.

##### Credit/Criminal/Public Records Check

- Negative reports may result in denial of application. Negative reports include, but are not limited to: late payments, collections, judgements, and total debt load. Less than 600 credit score: Denial. 600+ credit score: could result in denial or additional deposit.
- Criminal convictions or pending charges may result in the denial, including, but are not limited to: any drug-related crime, a person crime, a sex offense, a crime involving financial fraud, including identity theft or forgery, or any other crime in the conduct for which the applicant was convicted or charged is of a nature that would adversely affect the property of the landlord or a tenant or the health, safety or right to a peaceful enjoyment of the premises of residents, the landlord or the landlords agent.

##### Explanations/Exceptions

- All applicants may submit a written explanation with their application if there are extenuating circumstances which require additional consideration.
- If, after making a good faith effort, we are unable to verify information on your application, or if you fail to pass any of the screening criteria, the application process will be terminated.
- A note about pets: If you are a pet owner and the home you are applying for states "Pets Considered", it may or may not be accepted the property owner. An increased security deposit will also be required in the amount of \$500, per pet. Please include a photo of the pet with your application. A copy of the pet's latest vaccination is required at the signing of the rental agreement.
- Exceptions may be made for applicants with an increased deposit and/or qualified co-signers at the sole discretion on the Owner/Agent.

\*\*\*If you do not have two years unbiased, verifiable rental history, or do not meet our income criteria, you can apply with a co-signer. Please be sure to have the co-signer application ready to submit with your application(s) to be considered in line for the property. Co-signers *cannot* be used for poor credit, poor rental history or for criminal backgrounds.



**MULTIFAMILY NW**  
The Association Promoting Quality Rental Housing

**OREGON RENTAL APPLICATION**

TO BE COMPLETED BY EACH ADULT APPLICANT

ALL UNITS  
SUBJECT TO  
AVAILABILITY



OFFICE USE ONLY

NEW MOVE-IN    OCCUPANT TURNING 18    ADD/REMOVE ROOMMATE    TRANSFER

PROPERTY NAME / NUMBER \_\_\_\_\_

UNIT NUMBER \_\_\_\_\_ ADDRESS \_\_\_\_\_

DATE UNIT WANTED \_\_\_\_\_ UNIT RENT \$ \_\_\_\_\_ NON-REFUNDABLE SCREENING CHARGE \$ \_\_\_\_\_

OWNER / AGENT \_\_\_\_\_ PHONE \_\_\_\_\_

OWNER / AGENT ADDRESS \_\_\_\_\_

SMOKING POLICY:  ALLOWED - ENTIRE PREMISES    PROHIBITED - ENTIRE PREMISES    ALLOWED IN LIMITED AREAS (ASK MANAGEMENT FOR DETAILS)

APPLICANT

APPLICANT FULL LEGAL NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

PREVIOUS NAMES, ALIASES OR NICKNAMES USED \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SOC. SECURITY # \_\_\_\_\_ APPLICANT PHONE (\_\_\_\_) \_\_\_\_\_

GOVERNMENT ISSUED PHOTO I.D. TYPE \_\_\_\_\_ / STATE \_\_\_\_\_ EXP. DATE \_\_\_\_\_

CURRENT STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ DATE YOU MOVED IN \_\_\_\_\_

CURRENT LANDLORD NAME \_\_\_\_\_ LANDLORD PHONE (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS (OR APARTMENT NAME) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

APPLICANT FORMER STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

FORMER LANDLORD NAME \_\_\_\_\_ LANDLORD PHONE (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS (OR APARTMENT NAME) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

OTHER STATES AND COUNTIES YOU HAVE LIVED IN DURING THE PAST 5 YEARS \_\_\_\_\_

CURRENT EMPLOYER \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

POSITION \_\_\_\_\_ HOW LONG? \_\_\_\_\_

GROSS MONTHLY INCOME \$ \_\_\_\_\_

OTHER MONTHLY INCOME: SOURCE \_\_\_\_\_ \$ \_\_\_\_\_ / SOURCE \_\_\_\_\_ \$ \_\_\_\_\_

ARE YOU SELF-EMPLOYED?  YES  NO

PREVIOUS  ADDITIONAL EMPLOYER \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

POSITION \_\_\_\_\_ HOW LONG? \_\_\_\_\_

IF ADDITIONAL EMPLOYER, GROSS MONTHLY INCOME \$ \_\_\_\_\_

THE FOLLOWING INFORMATION IS SUBJECT TO CHANGE PRIOR TO EXECUTION OF RENTAL AGREEMENT.

THE FOLLOWING ARE MAXIMUM AMOUNTS. THE ACTUAL AMOUNT CHARGED WILL DEPEND ON UNIT SIZE, SCREENING RESULTS, AND OTHER FACTORS.

RENT

MAXIMUM POTENTIAL RENT \$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

DEPOSITS

SECURITY DEP. MINIMUM \$ \_\_\_\_\_

SECURITY DEP. MAXIMUM \$ \_\_\_\_\_ (DEPENDS ON SCREENING RESULTS AND UNIT SIZE)

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

INSURANCE

IF CHECKED, RENTER'S INSURANCE WILL BE REQUIRED.

IF CHECKED, RENTER'S INSURANCE WILL BE REQUIRED IF \_\_\_\_\_

MINIMUM INSURANCE AMOUNT \$ \_\_\_\_\_ (\$100,000 IF LEFT BLANK)

OWNER/AGENT MUST BE LISTED AS AN "INTERESTED PARTY" ON THE INSURANCE POLICY AND PROOF OF SUCH LISTING PROVIDED PRIOR TO MOVE-IN.

(NO INSURANCE WILL BE REQUIRED IF: A) THE HOUSEHOLD INCOME OF ALL OF THE TENANTS IN THE UNIT IS EQUAL TO OR LESS THAN 80 PERCENT OF THE AREA MEDIAN INCOME ADJUSTED FOR FAMILY SIZE AS MEASURED UP TO A FIVE-PERSON FAMILY, OR B) IF THE DWELLING UNIT HAS BEEN SUBSIDIZED WITH PUBLIC FUNDS, NOT INCLUDING HOUSING CHOICE VOUCHERS.)

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OTHER OCCUPANTS

NAME	DATE OF BIRTH	MAKE	MODEL	COLOR	STATE	LICENSE PLATE #
_____	MM/DD/YYYY	_____	_____	_____	_____	_____
_____	MM/DD/YYYY	_____	_____	_____	_____	_____
_____	MM/DD/YYYY	_____	_____	_____	_____	_____
_____	MM/DD/YYYY	_____	_____	_____	_____	_____
_____	MM/DD/YYYY	_____	_____	_____	_____	_____

VEHICLES

OTHER

IF CHECKED, PETS ARE NOT ALLOWED AT THIS PROPERTY.

IF CHECKED, PETS ARE ALLOWED SUBJECT TO APPROVAL BY MANAGEMENT. HOW MANY PETS WILL BE RESIDING IN THIS UNIT? \_\_\_\_\_

NAME \_\_\_\_\_ TYPE \_\_\_\_\_ BREED \_\_\_\_\_ AGE \_\_\_\_\_ WEIGHT \_\_\_\_\_

NAME \_\_\_\_\_ TYPE \_\_\_\_\_ BREED \_\_\_\_\_ AGE \_\_\_\_\_ WEIGHT \_\_\_\_\_

NAME \_\_\_\_\_ TYPE \_\_\_\_\_ BREED \_\_\_\_\_ AGE \_\_\_\_\_ WEIGHT \_\_\_\_\_

DO YOU INTEND TO USE:  WATERBED  AQUARIUM  MUSICAL INSTRUMENT \_\_\_\_\_

DO YOU HAVE RENTER'S INSURANCE?  YES  NO

EMERGENCY CONTACT \_\_\_\_\_ PHONE (\_\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CONTACT IN CASE OF DEATH \_\_\_\_\_ PHONE (\_\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_

HAVE YOU EVER BEEN EVICTED, OR ARE YOU CURRENTLY IN THE EVICTION PROCESS?  YES  NO IF YES, DATE \_\_\_\_\_

HAVE YOU EVER FILED FOR BANKRUPTCY, OR ARE YOU CURRENTLY IN THE BANKRUPTCY PROCESS?  YES  NO IF YES, DATE \_\_\_\_\_

HAVE YOU EVER HAD A HOME FORECLOSED ON, OR ARE YOU CURRENTLY IN THE FORECLOSURE PROCESS?  YES  NO IF YES, DATE \_\_\_\_\_

HAVE YOU OR ANY OTHER PERSON WHO WILL BE OCCUPYING THE UNIT EVER BEEN CONVICTED OF, OR PLED GUILTY OR NO CONTEST TO, ANY FELONY OR MISDEMEANOR?  YES  NO IF YES, WHO \_\_\_\_\_ WHERE \_\_\_\_\_ WHEN \_\_\_\_\_

WHAT \_\_\_\_\_

WHY ARE YOU VACATING YOUR PRESENT PLACE OF RESIDENCE? \_\_\_\_\_

HAVE YOU GIVEN LEGAL NOTICE WHERE YOU NOW LIVE?  YES  NO

HOW DID YOU HEAR ABOUT OUR PROPERTY? \_\_\_\_\_

Owner/Agent has charged a screening charge as set forth above. Owner/Agent may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the applicant's credit, income, employment, rental history, and criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 606 (b) of the Fair Credit Reporting Act, and a written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation.

**SCREENING COMPANY OR CREDIT REPORTING AGENCY**

COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_

If the application is approved, applicant will have \_\_\_\_\_ hours from the time of notification to either, at Owner/Agent's option, execute a rental agreement and make all deposits required thereunder or make a deposit to hold the unit and execute an agreement to execute a rental agreement which will provide for the forfeiture of the deposit if applicant fails to occupy the unit. If applicant fails to timely take the steps required above, he/she will be deemed to have refused the unit and the next application for the unit will be processed.

**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. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I have received and read the Owner/Agent's rental criteria.

APPLICANT  \_\_\_\_\_ DATE \_\_\_\_\_  PHOTO I.D. VERIFIED BY \_\_\_\_\_ (INITIALS)

OWNER/AGENT  \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_ TIME RECEIVED \_\_\_\_\_

OWNER/AGENT NOTES \_\_\_\_\_

SCREENING

SIGNATURE

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(800) 228-1837 \* \* FAX (800)-604-2201  
www.tenantdata.com

**APPLICANT AUTHORIZATION TO RELEASE CREDIT INFORMATION**

I understand that TENANT DATA SERVICES, (TDS, Inc.), will be processing my rental application & may access my credit information from the national repositories. I authorize my references and creditors to release, to ASI, Inc., all information necessary to complete said report. I further authorize my references and creditors to release said information telephonically and/or by fax, and request it be done in this manner whenever possible. Furthermore, I understand TDS, Inc. has my authorization to research all public records for my criminal and eviction history. I also understand that it may be necessary to verify my current employment. I authorize my current employer to release any and all information that may be required to complete the credit report. I further authorize ASI, Inc. to use a photocopy of this form when it is necessary to verify more than one of my references. I request that such a photocopy be fully honored.

Dated this \_\_\_\_\_ Day of \_\_\_\_\_ Year \_\_\_\_\_

Applicant's LEGAL NAME \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Spouse's LEGAL NAME: \_\_\_\_\_

Spouse's Signature \_\_\_\_\_

Applicant SS#: \_\_\_\_\_ Applicant Date of Birth: \_\_\_\_\_

Spouse SS#: \_\_\_\_\_ Spouse Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicants Phone # \_\_\_\_\_

Business Requesting Report: VELOCITY PROPERTY MANAGEMENT

LINDSAY . 541-388-1382 velocitypm@gmail.com 97360113  
Ordered By Phone Fax Account Number

**IMPORTANT: IF APPLICANT'S ARE NOT MARRIED, SEPARATE APPLICATIONS MUST BE FILLED OUT**  
Please select the type of report you require by checking the appropriate box

**SILVER REPORT**  
Credit Report

**GOLD REPORT**  
Credit Report, Felony & Misdemeanor  
Check, Eviction Check

**PLATINUM REPORT**  
Credit Report, Eviction Check  
Felony & Misdemeanor Check  
Rent Verification, Verification of Employment  
(include Application to Rent for platinum)

**ADDITIONAL REPORT OPTIONS**

<input type="checkbox"/>	Business Credit Report
<input type="checkbox"/>	Multi- State Criminal
<input type="checkbox"/>	Additional State - Criminal
<input type="checkbox"/>	State(s): _____
<input type="checkbox"/>	Additional State - Eviction
<input type="checkbox"/>	State(s): _____
<input type="checkbox"/>	Landlord Verification
<input type="checkbox"/>	AIM
<input type="checkbox"/>	Employment Verification

Reports can be faxed back to us at 1-800-604-2201 or emailed to [cs@tenantdata.com](mailto:cs@tenantdata.com)



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2524 NE Division St. #1 Bend, OR 97703

**APPLICANT SCREENING CHARGE RECEIPT**

Name: \_\_\_\_\_

Rental Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Fee Amount: \$40.00 (cash or money order)**

“Application Screening Charge” means any non-refundable payment of money charged by a landlord of a prospective tenant or applicant prior to entering into a rental agreement with that applicant for a residential dwelling unit, the purpose of which payment is to process an application for a rental agreement for a residential dwelling unit. If your application is **not processed**, the screening charge will be returned.

- I understand that renter’s insurance is a **requirement** of our tenancy, if our application is approved. (Exceptions may apply, see Oregon Senate Bill 91 Section 2.8) The required amount of insurance is \$100,000.
- I will bring proof of renter’s insurance 24 hours prior to your move-in.
- I understand that a deposit is required to guarantee and hold the unit within 24 hours of being approved. If for any reason I fail to rent the unit, the execution deposit is non-refundable.

**Fee Disclosure:**

Amounts listed below are subject to change before the rental agreement is executed.

Landlord may charge the following non-compliance fees:

- Late charge of \$100 per occurrence
- Smoke alarm & carbon monoxide alarm tampering fee of \$250 per occurrence
- Dishonored check fee of \$35 per occurrence plus amount charged by bank
- Early termination fee equal to 1 ½ times the monthly rent

I have read, understood and had any questions answered regarding the above information.

Application: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby acknowledge the receipt of the above mentioned applicant screening charge.

Agent for owner: \_\_\_\_\_ Date: \_\_\_\_\_