


RENTAL APPLICATION

(To be completed by each ADULT APPLICANT)

Verified Drivers License or State I.D. <input type="checkbox"/> Yes <input type="checkbox"/> No		FULL REPORT <input type="checkbox"/>	CREDIT PLUS <input type="checkbox"/>	FASTFACTS <input type="checkbox"/>	
<input type="checkbox"/> Co-signer <input type="checkbox"/> W/ Current Tenant		Time Application Received:			

Management Company	Complex Name	Contact	Telephone ()
Move In Date	Unit #	Monthly Rent \$	Lease Referred by

APPLICANT INFORMATION

APPLICANT Last Name	First	Middle	DOB	Social Security #	Drivers License #
ROOMMATE(S) NAME(S)					

CURRENT RESIDENCE

CURRENT Address	Apt #	City	State	Zip	Rent [] Own []	Move in date	Monthly Rent \$	Telephone ()	
LANDLORD/Mortgage Co. Name					City	State	Zip	Landlord Day Phone ()	Landlord Evening Phone ()
REASON FOR VACATING:		List any roommates you have:							
HAVE YOU GIVEN LEGAL NOTICE AT YOUR CURRENT RESIDENCE? Yes [] No []									

PREVIOUS RESIDENCE

PREVIOUS Address	Apt #	City	State	Zip	Rent [] Own []	Move in date	Monthly Rent \$	Telephone ()	
LANDLORD/Mortgage Co. Name					City	State	Zip	Landlord Day Phone ()	Landlord Evening Phone ()
REASON FOR VACATING:		List any roommates you had:							

EMPLOYMENT

APPLICANT CURRENT EMPLOYER	Position	Telephone ()	Supervisor Name	Salary/Month	Date of Hire MO/YR
APPLICANT PREVIOUS EMPLOYER	Position	Telephone ()	Supervisor Name	Salary/Month	From To
Additional Sources of Income Per Month (List any income to be included for qualification): \$ /Month from PHONE: ()					

ADDITIONAL INFORMATION

APPLICANT Bank Name	Branch	Telephone ()	Checking Account #	Savings Account #
List all Vehicles to be parked on site: Make Model Year Color License # State			OTHER OCCUPANTS	
			OCCUPANT NAME	DOB
			OCCUPANT NAME	DOB
Have you established retail credit? Yes [] No []				
Will you be moving in any of the following items? Waterbed Yes [] No [] Aquarium: Yes [] No [] Piano Yes [] No []		Do you have renters insurance? Yes [] No [] Carrier: Policy#:		Type & Size of PETS:
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 [] Yes [] Describe Offense: When:				Have you ever been evicted? No [] Yes []
EMERGENCY CONTACT	Relationship	Address		Telephone ()

APPLICANT SCREENING CHARGE \$

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. 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 _____ 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 _____

*Croman & Associates
Realty Inc.
P.O. Box 418
Rockaway Beach, OR 97136*

Croman and Associates Realty Residential Rental Screening Criteria

The following items will be required in order to obtain approval for a residential lease through Croman and Associates.

1. A completed application form from each adult (18+), including valid picture ID, Social Security number and a fee of \$35.00 per application, which may be paid by cash, personal check or money order.
2. Verifiable work history and/or documentation of monthly income in the form of pay stubs, tax returns, etc., or bank statement showing cash reserves sufficient to meet obligations under the lease. Newly hired persons may include a copy of an offer letter containing salary information. The income required for a given rental must be such that the rent does not exceed 35% of gross monthly income.
3. Acceptable credit history; lower than average credit scores may be evaluated according to circumstances and to determine whether any credit issues may affect ability to meet ongoing financial obligations under the proposed lease.
4. References from past 2 landlords; landlord references must be satisfactory, verifiable and of sufficient duration to have established a record of performance of obligations under prior leases. This criterion will be waived for persons who were prior homeowners without recent rental references, and with positive record of mortgage payments.
5. Upon approval of the application, applicant agrees to:
 - purchase renter's insurance sufficient to cover tenant's personal property and loss of use of the rental in the event that rental becomes uninhabitable through no fault of the tenant or landlord.
 - Within one week of approval, pay a reservation deposit equal to one month's rent along with a signed agreement in order to hold the rental for the move-in date.

The following items will be grounds for denial of the application apart from any other failure to qualify:

- Past F.E.D./eviction will be grounds for denial without exception.
- Serious criminal history, including but not limited to: assault, rape, destruction of property, fraud, drug offenses will be grounds for denial without exception.
- Falsification of any information submitted in the application form, unexplained irregularities, mismatched or incomplete information shall be grounds for denial.

Croman and Associates follows HUD guidelines with regard to occupancy of the rental by no more than two persons per bedroom, plus one person, and does not discriminate against any person belonging to a protected class. Applications shall be considered on a first come basis and no waiting list will be maintained. Any "Reasonable Accommodation" requested by the applicant shall require written verification of the need for such from a licensed medical professional and must be implemented at the tenant's own expense.

Croman and Associates Realty
116 Hwy 101 S.
mail to: PO Box 418
Rockaway Beach, OR 97136
ph. 503-355-3036
fax 503-355-3056
cromanandassociates@gmail.com

Applicant signature _____ Date _____