



Windermere Real Estate/K-2 Realty LLC

**2900 W Broadway • Moses Lake, WA 98837  
(509) 765-6270**

**- Property Managers -  
Pat Wold  
Vivian Stark  
Denise Varney**

## Rental Housing Application

Name: \_\_\_\_\_ Social Security#: \_\_\_\_\_

Name, Relationship and age of every person who will be living with you: \_\_\_\_\_  
\_\_\_\_\_

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

Current Landlords Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Length of Time at current address: \_\_\_\_\_ Rent: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Have you rented from us before? Yes \_\_\_\_\_ No \_\_\_\_\_

Employer name: \_\_\_\_\_ Phone: \_\_\_\_\_

How long employed with this company? \_\_\_\_\_ Previous employer: \_\_\_\_\_

Phone: \_\_\_\_\_ How long employed there? \_\_\_\_\_

Personal Reference name: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Total Monthly Household Income: \$ \_\_\_\_\_ List Sources \_\_\_\_\_

Do you have Pets? \_\_\_\_\_ Have you ever been turned in to collection? \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_ Do you have a car? \_\_\_\_\_ Year/Make/Model/License# \_\_\_\_\_

Checking Account # \_\_\_\_\_ Bank Name \_\_\_\_\_

Savings Account # \_\_\_\_\_ Bank Name \_\_\_\_\_

Credit Reference other than Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Credit: \_\_\_\_\_

If a first time renter and unemployed or receiving welfare, do you know an employed person who is willing to  
cosign a rental agreement? \_\_\_\_\_

Name of Cosigner: \_\_\_\_\_ Phone: \_\_\_\_\_

I certify the above statements are true and authorize Windermere/K-2 Realty LLC to verify any information I have provided.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**THE INFORMATION NETWORK**  
www.ACRAnet.com

**MORTGAGE SERVICES • EMPLOYMENT SCREENING**

521 W. Maxwell Ave. Spokane WA 99201-2417  
Customer Service Direct: 509 324-1345 • 509 324-1249 • 1 800 304-1249  
Fax 509 324-1240 • 1 800 845-7435 • customerservice@ACRAnet.com

**“TENANT SCREENING • COMMERCIAL REPORTING**

**THIS APPLICATION MUST BE COMPLETED IN FULL TO ASSURE PROMPT PROCESSING.**

Member Account # \_\_\_\_\_

Fax to: \_\_\_\_\_

**APPLICATION TO RENT**

Return Fax #: \_\_\_\_\_

**RENTAL UNIT INFORMATION**

Date of Application: \_\_\_\_\_ Drivers License # \_\_\_\_\_ ID:  SS  Mil. ID  ID Card  Other \_\_\_\_\_

Apartment/House Name: \_\_\_\_\_ Apartment/House Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Unit # \_\_\_\_\_ Move In Date: \_\_\_\_\_ Rent Amount: \_\_\_\_\_ Mgmt. Company Name: \_\_\_\_\_

**APPLICANT INFORMATION**

**ALL NON-MARRIED ADULTS MUST FILL OUT A SEPARATE APPLICATION AND PAY A SEPARATE SCREENING FEE.**

Applicant Name: \_\_\_\_\_ Spouse Name: \_\_\_\_\_  
(Include Jr. or Sr. If Applicable)

SSN: \_\_\_\_\_ Birth Date: \_\_\_\_\_ SSN: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Other Names used: (Please List) \_\_\_\_\_ Other Names used: (Please List) \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Total Occupants: \_\_\_\_\_ Names: (Please List) \_\_\_\_\_ Pet?  Yes  No Description: \_\_\_\_\_

**Have You Ever: Been Convicted Of A Criminal Offense? Yes  No  Been Evicted? Yes  No  Filed For Bankruptcy? Yes  No  If Yes To Any, Please Explain**

**RESIDENT HISTORY**

Current Address Street Apt. # City  
State Zip Code Phone #  
Moved In \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
 Own  Rent  Lease  
Landlord or Mortgage Co. \_\_\_\_\_  
Address, City, State, Zip Phone #

Former Address Street Apt. # City  
State Zip Code Phone #  
Moved in \_\_\_\_\_ Moved Out \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
 Own  Rent  Lease  
Landlord or Mortgage Co. \_\_\_\_\_  
Address, City, State, Zip Phone #

**EMPLOYMENT HISTORY**

Applicant Current Employer Start Date  
Address, City, State, Zip Phone #  
Position Monthly Salary

Spouse Current Employer Start Date  
Address, City, State, Zip Phone #  
Position Monthly Salary

**EMERGENCY CONTACT**

Name of Nearest Relative/Contact Relationship Address, City, State, Zip Phone

Applicant/Co-Applicant certify that the information provided herein is true and that any false information knowingly provided is subject to the penalty of perjury. Applicant/Co-Applicant hereby authorize the landlord and/or agents to verify the information and obtain credit reports, criminal background, unlawful detainer, prior eviction information, past tenancy report and employment verification through ACRAnet. Applicant/Co-Applicant understand that a NON-REFUNDABLE SCREENING FEE of \$ \_\_\_\_\_ will be paid to the landlord/agent at the time of application is submitted.

Date: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_ Co-Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Manager/Landlord: \_\_\_\_\_ Position: \_\_\_\_\_