



\$50 app fee per adult

2617 NE MLK Blvd - Portland, OR 97212 Phone(503)280-8786 Fax(503)281-1260 www.rmspdx.com

APPLICATION TO RENT

PLEASE COMPLETE

Property Address: _____

Monthly Rent: \$ _____ Security Deposit: \$ _____ Pet Deposit: \$ _____

Requested lease length _____ Requested Move-In Date: ____/____/____

PERSONAL INFORMATION

Full Name: _____ Telephone: (____) ____ - _____
First Middle Last

S.S. #: _____ Birth Date: ____/____/____ Email Address: _____

Current Address: _____ City: _____ State: _____ Zip: _____
Since: ____/____/____ Why are you moving? _____

Current Landlord: _____ Rent Amount: \$ _____ Telephone: (____) ____ - _____

Previous Address: _____ City: _____ State: _____ Zip: _____

From: ____/____/____ To: ____/____/____ Why did you move? _____

Previous Landlord: _____ Rent Amount: \$ _____ Telephone: (____) ____ - _____

Have you ever: Been evicted? __Y__N; Been sued by a landlord? __Y__N; Filed Bankruptcy __Y__N; Been convicted, pleaded guilty, or no contest to a crime? __Y__N; If Yes to any of these, please explain:

EMPLOYMENT/INCOME

Main Employer/Income: _____ How long? _____

Payroll/HR Department: _____ Telephone: (____) ____ - _____

Job Title: _____ Take home pay (per month): \$ _____ Full-time __ Part-time __

Additional Employer/Income: _____ How long? _____

Payroll/HR Department: _____ Telephone: (____) ____ - _____

Job Title: _____ Take home pay (per month): \$ _____ Full-time __ Part-time __

ADDITIONAL INFORMATION

et #1 (Type, age, weight): _____ Pet #2 (Type, age, weight): _____

Has Pet ever injured anyone or damaged anything? __Y__N Has Pet ever injured anyone or damaged anything? __Y__N

Do you own any of the following: Piano/Organ? __Y__N Water-filled furniture? __Y__N Fish Tank or Aquarium? __Y__N

MEMBERS OF HOUSEHOLD

For purposes of identification only, please list names and either ages or dates of birth of other person(s) to occupy unit:

→ SEE NEXT PAGE FOR DISCLOSURE(S) AND REQUIRED SIGNATURES →

<input type="checkbox"/> Saw sign at property	<input type="checkbox"/> RMSpdx.com	<input type="checkbox"/> The Oregonian/Oregonlive.com
<input type="checkbox"/> Referred by friend	<input type="checkbox"/> Craigslist.org	<input type="checkbox"/> HotPads.com
<input type="checkbox"/> Other, please explain: _____		

Have You Viewed the Inside of the Property?
 Yes – Date of Viewing _____
 No, I am applying for this property without the benefit of a viewing.

APPLICANT’S SCREENING CHARGE DISCLOSURE(S)

- 1) Owner/Agent may obtain a tenant screening or credit report which generally consists of:
 - a) credit history including credit standing;
 - b) public records, including but not limited to judgments, liens, evictions, and status of collection accounts;
 - c) information verification;
 - d) criminal records;
 - e) current obligations and credit rulings;
 - f) employment & income verification.

- 2) Owner/Agent is requiring a payment of an Applicant Screening Charge, \$50.00, none of which is refundable unless the Owner/Agent does not screen the applicant. Application valid for up to two weeks from date of receipt by Owner/Agent.

I understand I have the right to dispute the accuracy of any information provided to the Owner/Agent by a screening service or credit reporting agency. I am aware that an incomplete application may cause delays or result in denial of tenancy. I certify the above information is correct and complete and hereby authorize you to make any inquiries you feel necessary to evaluate my tenancy and credit standing (including, but not limited to credit checks).

If Owner/Agent is requiring payment of an applicant screening charge, applicant acknowledges receiving a copy of, and reading, Owner/Agent’s Screening Guidelines.

 Applicant Date

See Next Page for Payment Information



Rental Management Services accepts cash, check, money order or VISA/Mastercard for payment of the \$50/person application fee.

Payment of the application fee must be received by our office before your application processing begins.

Cash, check or money orders may be delivered to our office.

VISA/Mastercard payments may be faxed to 503-281-1260 or scanned/emailed to noah@rmspdx.com.

Your payment will be matched with your application to begin the screening process.

Please indicate your method of payment and number of applications below:

Name: _____

Rental Property Address: _____

_____ Cash \$50 x _____ (# of applications) = \$ _____

_____ Check \$50 x _____ (# of applications) = \$ _____

_____ Money Order \$50 x _____ (# of applications) = \$ _____

_____ Visa/MasterCard (please sign below and provide credit card information below)

\$50 x _____ (# of applications) = \$ _____

I authorize Rental Management to charge my credit card \$ _____

(Signature)

For Office Use Only: Amount _____ Date _____ Auth # _____

Please note: RMS will destroy this information after your credit card has been charged and an authorization code received.

Name on Card (please print): _____

Card #: _____

Exp Date: ____ / ____

Billing Zip Code: _____

Security Code: _____