

**RESIDENTIAL RENTAL APPLICATION**

Address of Rental Property: \_\_\_\_\_ Unit # \_\_\_\_\_ Rent Amount \_\_\_\_\_

Applicant's Complete Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

SSN# \_\_\_\_\_ DL#/State issued: \_\_\_\_\_

Tel# \_\_\_\_\_ Email Address: \_\_\_\_\_

Other Occupant's Name, Age & Relationship: \_\_\_\_\_

If any of the above noted occupants are currently married or separated but not living with their spouse, please note yes or no: \_\_\_ Y \_\_\_ N

√ Complete Every Item on Application. Incomplete and/or Inaccurate Information May Result in Process Delay or Denial of Tenancy.

**CURRENT ADDRESS (Required Entry)**

Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Apt # \_\_\_\_\_ Name of Apts \_\_\_\_\_  
How Long (Mo/Da/Yr) From \_\_\_\_\_ To \_\_\_\_\_  
Pymts / Rent Pd To \_\_\_\_\_ Amt \_\_\_\_\_  
Landlord/Mgmt Co. \_\_\_\_\_  
Address \_\_\_\_\_  
Tel# \_\_\_\_\_ Rent/Own/Lease \_\_\_\_\_

**PRIOR ADDRESS (Required Entry)**

Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Apt # \_\_\_\_\_ Name of Apts \_\_\_\_\_  
How Long (Mo/Da/Yr) From \_\_\_\_\_ To \_\_\_\_\_  
Pymts / Rent Pd To \_\_\_\_\_ Amt \_\_\_\_\_  
Landlord/Mgmt. Co \_\_\_\_\_  
Address \_\_\_\_\_  
Tel# \_\_\_\_\_ Rent/Own/Lease \_\_\_\_\_

√ **Current Employer** \_\_\_\_\_ Tel# \_\_\_\_\_ Supervisor \_\_\_\_\_

Dept / Attached to \_\_\_\_\_ Occupation \_\_\_\_\_ Rank \_\_\_\_\_

Hire Date \_\_\_\_\_ Monthly Salary \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Address \_\_\_\_\_ Suite \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

√ **Prior Employer** \_\_\_\_\_ Tel# \_\_\_\_\_

Dept / Attached to \_\_\_\_\_ Occupation \_\_\_\_\_ Rank \_\_\_\_\_

Hire Date \_\_\_\_\_ Monthly Salary \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Address \_\_\_\_\_ Suite \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

√ Additional Income (Interest, Child Support, Etc) \_\_\_\_\_

√ Bank \_\_\_\_\_ Acct# \_\_\_\_\_ Branch \_\_\_\_\_ Tel# \_\_\_\_\_

√ Pets? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, number, size, and type(s) \_\_\_\_\_

√ Disability status and require special accommodations? \_\_\_\_\_

**HAVE YOU OR ANY OTHER HOUSEHOLD MEMBER:**

Ever been evicted or refused to pay rent? Yes \_\_\_\_\_ No \_\_\_\_\_ Ever been Charged or Convicted of a Crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes to any of the above, give details: What is the nature of the offense? What County(ies) and State(s)? \_\_\_\_\_

When? \_\_\_\_\_

Ever used any other name(s)? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list name(s) \_\_\_\_\_

Are you or any other household member a Registered or Unregistered Sex Offender? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you or any other household member currently using any illegal drugs? Yes \_\_\_\_\_ No \_\_\_\_\_

Auto/Year/Make/Lic#: 1.) \_\_\_\_\_ 2.) \_\_\_\_\_

Local Contact \_\_\_\_\_ Address \_\_\_\_\_ Tel# \_\_\_\_\_

Nearest Relative \_\_\_\_\_ Address \_\_\_\_\_ Tel# \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Address \_\_\_\_\_ Tel# \_\_\_\_\_



Phone #: (509) 965-0385  
Fax #: (509) 972-0178

The Oaks Apartments  
Landmark Management  
915 S. 41st Ave., Yakima WA 98908

Orca Information, Inc.  
Phone: 360-588-1633/800-341-0022  
Fax: 360-588-1189/800-522-6722/866-268-0188



Addendum (A) to Application for Tenancy

**LETTER OF AUTHORIZATION**

To Whom It May Concern:

I understand I acquire no rights in an apartment until I sign this agreement and submit a holding fee in the amount of \$ \_\_\_\_355.00\_\_\_\_. If my tenancy is approved and I sign an apartment rental agreement, this fee shall be credited to my first month's rent and/or security deposit. If my tenancy is approved but I DO NOT sign an apartment rental agreement, then this fee shall be forfeited to the landlord as liquidated damages for holding an apartment at \_\_\_\_\_. If my tenancy is not approved this fee shall be returned to me.

In compliance with the Fair Credit Reporting Act, State and Federal laws, this is to inform you that an investigation involving the statements made on this application for tenancy is being initiated by ORCA Information. I certify that to the best of my knowledge all statements are "true & complete". I further authorize Orca Information, Inc. to obtain **CREDIT REPORTS, EMPLOYMENT REFERENCES, COURT, CRIMINAL & JUVENILE RECORDS, ARREST DETENTION INFORMATION and CHRACTER REFERENCES, GENERAL REPUTATION, MODE OF LIVING, and RENTAL REFERENCES** as needed to verify all information put forth on this application. **SCREENING FEE IS NON-REFUNDABLE.**

\_\_\_\_\_  
Applicant's Name (please print)

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

\_\_\_\_\_  
Date of Authorization

\_\_\_\_\_  
Manager's/Assistant Manager's Signature