



AUTHORIZATION TO RELEASE INFORMATION

I respectfully request and authorize you to provide Parkway Place Real Estate, LLC with any and all information requested. This information will be used to assist in the assessment of my qualifications for tenancy with this company. I understand that such information may include employment history, income verification, rental history and other confidential information. I further understand that such information obtained by Parkway Place Real Estate, LLC under this release will not be made available to me. A copy of this release shall be valid since Parkway Place Real Estate, LLC holds the original authorized document.

I hereby release you, your organization and others from any liability or damage which may result from furnishing Parkway Place Real Estate, LLC with requested information.

Signature

Date

Print Your Name

Social Security Number

Cathy Liberty/Designated Broker

2580 Landon Drive, Suite D
Bullhead City, AZ 86429
(928) 754-2575





APPLICANT SCREENING CRITERIA

Parkway Place Real Estate 2580 Landon Drive Suite D, Bullhead City, AZ 86429
(928) 754-2575 www.Bullhead4Sale.com

IDENTIFICATION: Applicants shall provide picture ID at time of application.

APPLICATION PROCESS: Applicant is urged to review the screening criteria to determine if requirements can be met. Each applicant over 18 shall submit a completed application and pay the appropriate fee(s). Upon acceptance applicant(s) will be required to pay applicable security deposit (in the form of certified funds) within 48 hours after acceptance.

SOURCE OF INCOME: All sources of employment and non-employment income shall be legally obtained and verifiable.

HOUSING REFERENCES: The applicant(s) shall provide information necessary to verify current and previous rental history for the past 5 years. Information obtained by those related by blood or marriage may require compliance with the variance policy.

CREDIT WORTHINESS: Credit worthiness will be determined from a credit report which shall reflect prudent payment history. Applicant(s) history should be free of evictions, judgments and collections. A valid explanation may be considered by the property manager if provided by the applicant(s). Applicant(s) with an existing bankruptcy, not discharged at time of application, will not be accepted.

LIMITATION: Occupancy is limited to two (2) people per bedroom per dwelling unit. Parking is limited to three (3) vehicles unless authorized by your property manager.

PETS: Pets may not be permitted unless accepted by the property owner. Pet information will be presented to the owner at time of application review. If the owner approves pet(s), there will be a non-refundable pet deposit of \$200 per pet. No additional pets allowed during the tenancy. Breach of this may require eviction.

INCOMPLETE, INNACCURATE OR FALSIFIED INFORMATION: Any information that is incomplete, illegible, inaccurate or falsified may be grounds for rejection of the application or termination of the rental agreement upon discovery.

VARIANCE POLICY: Failure to meet the screening criteria as stated may be grounds for: Denial of application or if a co-signer is acceptable, such individual(s) will also be required to meet the screening criteria, and or payment of an additional deposit or additional prepaid rent.

Applicant

Date

Applicant

Date



APPLICATION FOR RESIDENCY

PLEASE PRINT OR TYPE - Page 1

Applicant First Name _____ Middle _____ Last _____

Co-Applicant First Name _____ Middle _____ Last _____

Names and Ages of all Occupants _____

Present Address _____ Zip _____ Phone _____

How Long _____ Present Landlord _____ Phone _____

Past Address _____ Zip _____ Phone _____

How Long _____ Past Landlord _____ Phone _____

Date of Birth ___/___/___ Co-Applicant's Date of Birth ___/___/___

Driver's License No. _____ Co-Applicant's Driver's License No. _____

Social Security Number ___/___/___ Co-Applicant's Social Security Number ___/___/___

Employer _____ Co-Applicant's Employer _____

Address _____ Address _____

Phone _____ Yrs Employed _____ Phone _____ Yrs Employed _____

Title _____ Salary _____ Title _____ Salary _____

References:

Name of Nearest relative NOT living with you: _____ Relationship _____

Address _____ Phone _____

Emergency Contact _____ Phone _____

Address _____

Bank Name _____ Checking Account # N/A Savings Account# N/A

Charge Account _____ Address _____

Charge Account _____ Address _____

Do you have pets? Y N How many? _____ Describe _____

Do you own a waterbed? Y N Have you ever been evicted? _____

How's your credit? _____ Have you had a Bankruptcy? Y N When? _____



APPLICATION FOR RESIDENCY

PLEASE PRINT OR TYPE - Page 2

Property Applied for? _____

Rent \$ _____ Deposit (refundable) \$ _____ (nonrefundable) \$ _____ Total \$ _____

I (we) hereby tender a non-refundable fee of \$ _____ to Parkway Place Real Estate for processing this application.

Additionally, I (we) agree to execute a lease for _____ months beginning on ____/____/____ and to pay the

Balance of the move in costs on or before ____/____/____.

I (we) certify that the above information is true and correct and further authorize Parkway Place Real Estate to

Verify the information including, but not limited to, obtaining a credit report and verification of my (our)

Employment History.

Applicant

Date

Applicant

Date

TIME FOR ACCEPTANCE: Landlord must accept this application for residency on or before ____/____/____

RIGHT TO ACCEPT OTHER OFFERS: Landlord reserves the right to accept any offer prior to the acceptance of

this application. Landlord acknowledges receipt of a copy hereof and authorizes a copy to be delivered to

Applicant.

Landlord

Date