APPLICATION FOR RENTAL

Madras Apartments 1701 Madras Street SE Salem, OR 97306 Phone: 503-362-8965 Fax: 503-540-7872

Referred by:	
Type of Unit Requested:	
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Salem, OR 97306	IA. 393-340-7072	= = = = = = = = = = = = = = = = = = =	Move In:
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Legal Name (First & Last)	Social Security Number	Date of Birth	
Driver License #/Issuing State	Daytime Phone Number	_	Total # of Occupants
Driver Electise #/Issuing State	Daytine I none Number		Total # 01 Occupants
Legal Names of Co-Applicants (Anyon	te 18 years of age or older must complete a so	eparate application)	
Name of all occupants 17 years of age o	or younger:		
Name (First & Last):		Date of Birth:	
Name (First & Last):		Date of Birth:	
		Date of Birth:	
,		Date of Birth:	
	dence Information must be completely filled		
Current Residence:	must be completely fined	2 to process the approaction.	
Own? Rent? M	Nove in Date (mm/yyyy):A	nticipated Move Out Date (mm/yyyy)):
Amount of monthly rent or mortgage:	Reason for vacating:		
Street Address:		Apt #:	
City, State & Zip:			
	rd or Mortgage Company:		
Are you related to the landlord?	Are you a friend to the landlord?	Are you living with the	e landlord?
Previous Residence:			
Own? Rent?	Move in date (mm/yyyy):	Move out date (mm/y	yyy):
Amount of monthly rent or mortgage:	Reason for vacating:		
Street Address:		Apt #:	
City, State & Zip:			
Name and telephone number of previous landle	ord or Mortgage Company:		
Are you related to the landlord?	Are you a friend to the landlord?	Are you living with the	e landlord?
	on a separate sheet of paper or on the back of yo		
Monthly Income:			
<u> </u>		Monthly Net Income:	
-			
Supervisor Name:			
-	s, list previous employers name, number and date		ion.
	e Make, Model, Color, Year & License Plate Numb		
	ive you or anyone else who will be occupying the u		lty or no contest to any
•	(Please explain felony on back of applic		·
	Type: Do you intend to use an Aqua		
Applicant certifies that the information provided is tr Information provided may be made available to other	rue and correct. Applicant authorizes the landlord/agent to m r agencies for verification during the application process and cation or subsequent termination of tenancy upon such time t	ake any and all necessary inquires to deter- potentially during occupancy if approved.	mine if applicant meets our rental criteria.
Applicants Signature:		Date:	
Pro-			
CASCADE RENTAL MANAGEMENT CO. Turner, Oregon		l:	Received By: