APPLICATION FOR RENTAL

Cameron Apartments

Phone: 503-831-0240

| Referred by: | |
|------------------------------------|---|
| Type of Unit Requested: | _ |
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| Dallas, OR 97338 | ax: 503-831-0241 | Type of Unit Requested: Anticipated Date of Move In: |
|---|---|--|
| | | |
| Legal Name (First & Last) | Social Security Number | Date of Birth |
| Driver License #/Issuing State | Daytime Phone Number | Total # of Occupants |
| Legal Names of Co-Applicants (Anyon | ne 18 years of age or older must complete a sepa | arate application) |
| Name of all occupants 17 years of age | or younger: | |
| Name (First & Last): | | Date of Birth: |
| Name (First & Last): | | Date of Birth: |
| , , , | | Date of Birth: |
| , , | | |
| Name (First & Last): | | Date of Birth: |
| | idence Information must be completely filled or | ut to process the application. |
| Current Residence: | Move in data (mm/mmm): | Move out date(mm/yyyy): |
| | | iviove out date(init/yyyy) |
| | | Apt #: |
| | | |
| • | | |
| Are you related to the landlord? | | |
| | | |
| Previous Residence: | | |
| Own?Rent? | Move in date (mm/yyyy): | Move out date (mm/yyyy): |
| Amount of monthly rent or mortgage: | Reason for vacating: | |
| Street Address: | | Apt #: |
| J. 1 | | |
| Name and telephone number of previous land | lord or Mortgage Company: | |
| Are you related to the landlord? | Are you a friend to the landlord? | Are you living with the landlord? |
| Monthly Income: | | |
| | | Frequency of Income? |
| Company Name: | | |
| | | Company Phone Number: |
| | Date of Hire(mm/yyyy): | |
| If current employment is less than 6 month | s, list previous employers name, number and dates of | f hire on the back of the application. |
| | e Make, Model, Color, Year & License Plate Number | |
| Have you ever been evicted? Ha | eve you or anyone else who will be occupying the unit | ever been convicted of, pled guilty or no contest to any |
| Felony? □ Yes □ No If Yes, Who? | (Please explain felony on back of application) | ion) Have you ever filed bankruptcy? If yes, When? |
| Do you have pets or other animals? | _Type:Do you intend to use an Aquariu | ımIf yes, size? |
| Information provided may be made available to other | | any and all necessary inquires to determine if applicant meets our rental criteria. entially during occupancy if approved. Any information provided that is incomple the information is determined untrue. |
| Applicants Signature: | | Date: |
| CASCADE RENTAL MANAGEMENT CO. | | |
| Turner, Oregon | Date/Time Received: | Received By: |