



OFFICE USE ONLY

NEW MOVE-IN OCCUPANT TURNING 18 ADD/REMOVE ROOMMATE TRANSFER

PROPERTY NAME / NUMBER _____

UNIT NUMBER _____ ADDRESS _____

DATE UNIT WANTED _____ UNIT RENT \$ _____ NON-REFUNDABLE SCREENING CHARGE \$ 50.00

OWNER / AGENT John L. Scott Property Management PHONE (503) 588-7069

OWNER / AGENT ADDRESS 1124 Cornucopia St NW, Salem, OR 97304

SMOKING POLICY: ALLOWED - ENTIRE PREMISES PROHIBITED - ENTIRE PREMISES ALLOWED IN LIMITED AREAS (ASK MANAGEMENT FOR DETAILS)

APPLICANT

APPLICANT FULL LEGAL NAME _____ EMAIL _____

PREVIOUS NAMES, ALIASES OR NICKNAMES USED _____

DATE OF BIRTH _____ SOC. SECURITY # _____ APPLICANT PHONE (_____)

GOVERNMENT ISSUED PHOTO I.D. TYPE _____ # _____ / STATE _____ EXP. DATE _____

CURRENT STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ DATE YOU MOVED IN _____

CURRENT LANDLORD NAME _____ LANDLORD PHONE (_____)

STREET ADDRESS (OR APARTMENT NAME) _____

CITY _____ STATE _____ ZIP _____

APPLICANT FORMER STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ FROM _____ TO _____

FORMER LANDLORD NAME _____ LANDLORD PHONE (_____)

STREET ADDRESS (OR APARTMENT NAME) _____

CITY _____ STATE _____ ZIP _____

OTHER STATES AND COUNTIES YOU HAVE LIVED IN DURING THE PAST 5 YEARS _____

CURRENT EMPLOYER _____ PHONE (_____)

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

POSITION _____ HOW LONG? _____

GROSS MONTHLY INCOME \$ _____

OTHER MONTHLY INCOME: SOURCE _____ \$ _____ / SOURCE _____ \$ _____

ARE YOU SELF-EMPLOYED? YES NO

PREVIOUS ADDITIONAL EMPLOYER _____ PHONE (_____)

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

POSITION _____ HOW LONG? _____

IF ADDITIONAL EMPLOYER, GROSS MONTHLY INCOME \$ _____

THE FOLLOWING INFORMATION IS SUBJECT TO CHANGE PRIOR TO EXECUTION OF RENTAL AGREEMENT.

RENT

THE FOLLOWING ARE MAXIMUM AMOUNTS. THE ACTUAL AMOUNT CHARGED WILL DEPEND ON UNIT SIZE, SCREENING RESULTS, AND OTHER FACTORS.

MAXIMUM POTENTIAL RENT \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

DEPOSITS

SECURITY DEP. MINIMUM \$ _____

SECURITY DEP. MAXIMUM \$ _____
(DEPENDS ON SCREENING RESULTS AND UNIT SIZE)

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

INSURANCE

IF CHECKED, RENTER'S INSURANCE WILL BE REQUIRED.

IF CHECKED, RENTER'S INSURANCE WILL BE REQUIRED IF _____

MINIMUM INSURANCE AMOUNT: \$ 100,000.00
(\$100,000 IF LEFT BLANK)

OWNER/AGENT MUST BE LISTED AS AN "INTERESTED PERSON" ON THE INSURANCE POLICY AND PROOF OF SUCH LISTING PROVIDED PRIOR TO MOVE-IN.

(NO INSURANCE WILL BE REQUIRED IF: A) THE HOUSEHOLD INCOME OF ALL OF THE TENANTS IN THE UNIT IS EQUAL TO OR LESS THAN 50 PERCENT OF THE AREA MEDIAN INCOME, ADJUSTED FOR FAMILY SIZE AS MEASURED UP TO A FIVE-PERSON FAMILY; OR B) IF THE DWELLING UNIT HAS BEEN SUBSIDIZED WITH PUBLIC FUNDS, NOT INCLUDING HOUSING CHOICE VOUCHERS.)

OTHER OCCUPANTS	NAME	DATE OF BIRTH	VEHICLES	MAKE	MODEL	COLOR	STATE	LICENSE PLATE #	
	_____	MM/DD/YYYY		_____	_____	_____	_____	_____	_____
	_____	MM/DD/YYYY		_____	_____	_____	_____	_____	_____
	_____	MM/DD/YYYY		_____	_____	_____	_____	_____	_____
	_____	MM/DD/YYYY		_____	_____	_____	_____	_____	_____
	_____	MM/DD/YYYY		_____	_____	_____	_____	_____	_____

IF CHECKED, PETS ARE NOT ALLOWED AT THIS PROPERTY.

IF CHECKED, PETS ARE ALLOWED SUBJECT TO APPROVAL BY MANAGEMENT. HOW MANY PETS WILL BE RESIDING IN THIS UNIT? _____

NAME _____ TYPE _____ BREED _____ AGE _____ WEIGHT _____

NAME _____ TYPE _____ BREED _____ AGE _____ WEIGHT _____

NAME _____ TYPE _____ BREED _____ AGE _____ WEIGHT _____

DO YOU INTEND TO USE: WATERBED AQUARIUM MUSICAL INSTRUMENT _____

DO YOU HAVE RENTER'S INSURANCE? YES NO

EMERGENCY CONTACT _____ PHONE (____) _____

ADDRESS _____

CONTACT IN CASE OF DEATH _____ PHONE (____) _____

ADDRESS _____

HAVE YOU EVER BEEN EVICTED, OR ARE YOU CURRENTLY IN THE EVICTION PROCESS? YES NO IF YES, DATE _____ MM/DD/YYYY

HAVE YOU EVER FILED FOR BANKRUPTCY, OR ARE YOU CURRENTLY IN THE BANKRUPTCY PROCESS? YES NO IF YES, DATE _____ MM/DD/YYYY

HAVE YOU EVER HAD A HOME FORECLOSED ON, OR ARE YOU CURRENTLY IN THE FORECLOSURE PROCESS? YES NO IF YES, DATE _____ MM/DD/YYYY

HAVE YOU OR ANY OTHER PERSON WHO WILL BE OCCUPYING THE UNIT EVER BEEN CONVICTED OF, OR PLED GUILTY OR NO CONTEST TO, ANY FELONY OR MISDEMEANOR? YES NO IF YES, WHO _____ WHERE _____ WHEN _____ MM/DD/YYYY

WHAT _____

WHY ARE YOU VACATING YOUR PRESENT PLACE OF RESIDENCE? _____

HAVE YOU GIVEN LEGAL NOTICE WHERE YOU NOW LIVE? YES NO

HOW DID YOU HEAR ABOUT OUR PROPERTY? _____

Owner/Agent has charged a screening charge as set forth above. Owner/Agent may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the applicant's credit, income, employment, rental history, and criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 606 (b) of the Fair Credit Reporting Act, and a written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation.

SCREENING COMPANY OR CREDIT REPORTING AGENCY

COMPANY NAME Pacific Screening, Inc. PHONE (503) 297-1941

ADDRESS P.O. Box 25582, Portland, OR 97298

EMAIL _____

If the application is approved, applicant will have 48 hours from the time of notification to either, at Owner/Agent's option, execute a rental agreement and make all deposits required thereunder or make a deposit to hold the unit and execute an agreement to execute a rental agreement which will provide for the forfeiture of the deposit if applicant fails to occupy the unit. If applicant fails to timely take the steps required above, he/she will be deemed to have refused the unit and the next application for the unit will be processed.

GOOD FAITH ESTIMATE

Approximate number of units currently available, or which will in the foreseeable future be available, of the size and in the area requested by applicant: _____ unit(s).

Approximate number of applications previously accepted and currently under consideration for those units: _____ application(s).

If the blanks above are not filled in, then there is at least one unit available and there are no applications ahead of yours currently under consideration.

I certify that the above information is correct and complete and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I understand that giving incomplete or false information is grounds for rejection of this application. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I have received and read the Owner/Agent's rental criteria.

APPLICANT X DATE _____ PHOTO I.D. VERIFIED BY _____ (INITIALS)

OWNER/AGENT X DATE RECEIVED _____ TIME RECEIVED _____

OWNER/AGENT NOTES _____

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Screening Terms & Conditions

Before you apply to rent an apartment or home from John L. Scott Property Management, please take the time to review our screening policy. Applications are accepted on a first come first serve basis. All persons 18 years of age or older will be required to complete an application. Incomplete, inaccurate or falsified information may be grounds for denial upon discovery. Incomplete applications or incomplete application materials will NOT be accepted.

The screening charge is **\$50.00 per adult (18 or older) and is non-refundable. *Co-signers are not accepted***

Selection Process Guidelines

General Statements

1. Positive identification with valid photo identification will be required.
2. Each applicant will be required to qualify individually or as per specific criteria areas.
3. Inaccurate or falsified information will be grounds for denial of the application.
4. The use, manufacture and or distribution of federally illegal drugs or substances is not allowed on any property.
5. Any individual, whose tenancy may constitute a direct threat to the health and safety of any individual, the complex, or the property of others, will be denied tenancy

Criminal Conviction Criteria

1. Upon receipt of the rental application and screening fee, Owner/Agent will conduct a search of public records to determine whether the applicant or any proposed tenant has been convicted of, or pled guilty to or no contest to, any crime. Any of the following shall be grounds for denial in the rental application.
 - a. A conviction, guilty or no contest plea for any felony involving serious injury, kidnapping, death, arson, rape, sex crimes and/or child sex crimes, extensive property damage or drug related offenses (sale, manufacture, delivery or possession with intent to sell), or Class A felony burglary or Class A felony robbery; or
 - b. A conviction, guilty plea or no contest plea, where the date of disposition, release or parole has occurred within the last seven years, for: any other felony charges; or
 - c. A conviction, guilty plea or no contest plea, where the date of disposition, release or parole has occurred within the last seven years, for: any misdemeanor or gross misdemeanor involving assault, intimidation, Property damage, or weapons, charges or that is sex-related or drug-related (sale, manufacture, delivery or possession with intent to sell); or (*see continuation*)

d. A conviction, guilty plea or no contest plea, where the date of disposition, release or parole has occurred within the last three years, for: any B or C misdemeanor in the above categories or those involving criminal trespass I, theft, dishonesty, or prostitution.

Pending charges or outstanding warrants for any of the above will result in a suspension of the application process until the charges are resolved. No unit will be held awaiting resolution of pending charges.

Rental Criteria

1. Two years of verifiable contractual rental or mortgage payment history from a current third party source is required.
2. 5 years of eviction-free history is required.
3. Three or more 72-hour notices within one year may result in denial of application.
4. Three or more dishonored checks within one year will result in denial of the application.
5. Rental history reflecting outstanding balance will result in denial of the application.
6. Verification of acceptable housekeeping habits with no history of damage to any portion of the property.

Credit Criteria

1. Negative or adverse debt showing on consumer credit report may require additional security deposits.
2. Unpaid collections (not related to medical expenses) may result in denial of the application. Utility accounts in collections will result in denial if not satisfied during screening process.
3. Repossessions or Bankruptcies within the last two years will disqualify an applicant if poor credit history continues after filing.

Income Criteria

1. Monthly income should be equal to two times stated rent, and must be from verifiable, legal source. Applicants must provide consecutive and recent pay stubs for the last 8 weeks from application date.

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2. Additional sources of income may be considered. These sources include: GI benefits, disability, trust funds, social security, child support, pensions, grants and savings accounts.

Additional Income / Employment Criteria

1. Six months of verifiable employment will be required if used as source of income. If employment is to begin shortly, a "letter of intent" to hire from the employer is required.
2. Self-employed applicants will be required to submit the previous year's tax returns along with previous two months bank statements.

****Additional verification and or financial statements/records may be required.***

Co-Signers/Guarantors

1. Co-signers/Guarantors are not accepted.

Animals

1. Each of our rental units have an individual policy regarding animals determined by property owner. Be sure to check with staff regarding animal policy for the rental unit you are applying for. If a property does allow for an animal an additional refundable deposit will be required.

Companion or Service animals are allowed at all our rental properties with corresponding documentation.

Renter's Insurance

1. John L. Scott Property Management requires tenants to carry a minimum of \$100,000 Personal Liability Insurance. Personal Property Coverage is highly recommended. You may select any insurance provider.

Occupancy Guidelines

1. Our occupancy guidelines are based on the standard of 2 people per bedroom plus one per rental unit.

One Bedroom (plus den if applicable)	3 persons
Two Bedroom	5 persons
Three Bedroom	7 persons
Four Bedroom	9 persons
Five Bedroom	11 persons

Smoking Policy

1. Most of our rental units have a NO SMOKING policy. Please verify smoking policy prior to applying.

Yard/Lawn Care

Most rental homes require that the tenant be responsible for yard/lawn care which may not be limited to mowing & edging.

Utilities

Tenants are required to pay utilities in most rental homes, please verify with staff on what utilities are your responsibility before applying. These utilities are commonly, but not limited to: water, sewer, garbage/recycling service, gas, electricity etc. Utilities must be set up in your name as of the date of possession. Account numbers will be required prior to move in.

Deposit Levels

The minimum security deposit on all rental units is equal to the amount of rent. The overall results of screening will determine the total amount of security deposit required, which can be up to double the minimum deposit.

Thank you for your interest!

I have read and understand the entire applicant screening criteria of this company.

Applicant Initial(s) _____

