

## APPLICATION AND APPROVAL PROCESS

- Use our application as provided
- · Each person 18 years and older must fill out an application-please include photo ID and pay stubs
- Application must be filled out completely and signed by applicant
- Use a credit or debit card for the \$33 screening fee, if payment is not included on the application it is not considered a complete application and will not be screened
- Enter property address, rent amount and lease length desired on the application

The application will be reviewed by the property manager and the applicant will be contacted to review terms.

Screening may take 24-72 hours depending on how busy the screening company is at that time.

The property will remain on the market, and will continue to be shown to prospective applicants until a lease is signed and payment made to secure the property.

· It is not possible to 'hold' a property or put a deposit down prior to application approval.

Application screening includes:

- Credit check
- Criminal background search
- · Rental reference and verification
- Employment and income verification

Please remember to provide proof of income to help expedite the process.

## DENIAL OF APPLICATION

- · A criminal background will result in an automatic denial of an application
- Collections, liens, slow pay or bankruptcy may result in the denial of an application
- A poor landlord reference may result in the denial of an application
- · Applicants must make 3 times the rent per month to qualify

The lease will be written once:

- The application is approved and/or
- · A response from the owner is obtained



## **RETURN APPLICATION TO:**

ABODA Property Management 6525 240th St. SE Bldg. B Woodinville, WA 98072 425-861-0500



Rent: \$\_\_\_\_\_\_

Move in: \_\_\_\_\_\_

Lease length: \_\_\_\_\_\_

\$33.00 Non-Refundable Screening Fee. Each person 18 years and older MUST fill out a separate application.

	EQUA OPP	AL HOUSING ORTUNITY			
Address of Rental Property:			Unit#:		
Applicant's Name:				:h:	
Social Security#:Driver's License:			Telephone:		
Other Occupant's Name		Email:			
CURRENT ADDRESS:		PRIOR ADDRES	PRIOR ADDRESS:		
Street:		Street:			
City:	State:Zip:	City:	State:	Zip:	
Apt#:Name of Apt:		Apt#:N	Apt#:Name of Apt:		
Move in date:	Move out date:	Move in date:	Move in date:Move out date:		
Rent O Own O Mon	thly amount:	Rent O Own C	Rent O Own O Monthly amount:		
Landlord/Mortgage Co.	name:	Landlord/Mortga	Landlord/Mortgage Co. name:		
Address:		Address:	Address:		
Landlord's/Mortgage Co	o. telephone #:	Landlord's/Mort	Landlord's/Mortgage Co. telephone #:		
Email:			Email:		
CURRENT EMPLOYER:		ADDITIONAL II	ADDITIONAL INCOME:		
Company:			Source:		
	Supervisor:		Monthly Income:		
·		· ·	Contact:		
Hire date:Salary:			Telephone#:		
	Full O Part time: O	·			
Pets? Yes O No O	If yes, number, size, age and t	ype(s):			
Have you ever used any other names? Yes O No O If Yes, name(s):					
Have you ever been convicted of a crime? Yes O No O					
Have you ever been evicted or refused to pay rent? Yes O No O					
Auto/Year/License 1:		2:			
Local contact:	Address:		Telephone	e#:	
Nearest relative:	Address:		Telephone	e#:	
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 AccuSearch Inc. I certify to the best of my knowledge all state-					
ments are true and comple	ete. I further authorize AccuSearch	n Inc. to obtain credit reports	, court/criminal record	ds, character reports,	
	of living, rental references and em EE IS NON- REFUNDABLE.	ployment history as needed	to verify all the inform	ation put forth on this	
			Dato.		
Applicant's signature:Date:					
Screening Provided By:	P.O. Box 644  Ferndale, WA 98248  Phone: 1-877-646-4466  Fax: 1-877-646-4467	I authorize AccuSearch, Inc. to charge my credit card account.			
Accu Search		Visa: O MasterCard: O American Express: O			
		Card number:			
		Amount \$:	_Exp. Date:	Code:	

Signature: \_\_\_\_