

Rental Application for the Iliad Apartments
www.iliadapartments.com
Voice: 206.328.2498

Please provide a picture ID issued by a state or national entity at the time you submit you application.

Date: Mo _____ Day: _____ Year: _____ Phone #: _____ Other # _____

First Name: _____ Middle Name: _____ Last Name: _____

S.S.# _____ Birth Date: Month: _____ Day: _____ Year: _____

Why are you moving? _____

Your Email Address: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Name of Property: _____ Apt #: _____ Mgr Pho.#: _____ Mgr Name: _____

Tenancy Length: _____ From: Month: _____ Year: _____ To; Month: _____ Year: _____ Rent \$ _____

Previous Address: _____ City: _____ State: _____ Zip: _____

Name of Property: _____ Apt #: _____ Mgr Pho.#: _____ Mgr Name: _____

Tenancy Length: _____ From: Month: _____ year: _____ To; Month: _____ Year _____ Rent \$ _____

Current Employer: _____ Occupation: _____ Phone _____

Address: _____ City: _____ State: _____ Zip: _____

Hire Date: Mo: _____ Year: _____ Supervisor: _____ Mo. Salary: \$ _____

Previous Employer: _____ Occupation: _____ Phone _____

Address: _____ City: _____ State: _____ Zip: _____

Hire Date: Mo: _____ Year: _____ Supervisor: _____ Mo. Salary: \$ _____

Have you ever been convicted of a criminal offense: _____ Filed bankruptcy: _____ Been evicted: _____

If yes on any, please explain: _____

List all People Who Will Live in the Rented Premises: You don't have to list yourself here.

Name: _____ Age: _____ Relationship _____

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Name: _____ Age: _____ Relationship _____

Emergency Contact information:

Name : _____ Relationship: _____ Pho: _____ Pho: _____

Name : _____ Relationship: _____ Pho: _____ Pho: _____

Name : _____ Relationship: _____ Pho: _____ Pho: _____

Name : _____ Relationship: _____ Pho: _____ Pho: _____

Vehicle information:

Description Of Vehicle: Make: _____ Model: _____ Year: _____ Color: _____ License: _____

Disclosure / Agreement / Consent

I hereby give my permission to communicate with my current and former landlord or property manager for the purpose of discussing any and all of the facts and circumstances of my current or former tenancy, as well as the other information listed above. I also give my permission to communicate with my current employer(s) and/or supervisor(s) for the purpose of verifying the employment information listed above. I understand there are no limitations or restrictions regarding what may be discussed or revealed. I am aware that a credit history, eviction search and criminal background check will be done in conjunction with my application. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

As part of your rental application process, On-Site will create a rental report that accesses up to three types of information about you: 1) credit/financial records; 2) court records; and 3) personal references. Any negative, misleading, or unverifiable information may result in the denial of your application. In the event of a denial or other adverse action, you have a right to obtain a free copy of your rental report from On-Site, and to dispute the accuracy of any information appearing in it. You may contact On-Site Renter Relations by phone (877) 222-0384; fax (888) 774-0144; or mail at 307 Orchard City Dr., Ste. 110, Campbell, CA 95008. For more information, visit www.renterrelations.com. **I understand that any deposit submitted to hold an apartment is non-refundable.**

The Application Processing Fee Is \$33.76 and this is exactly what we are charged for this service.

Application For Apartment: # _____ Rent per month: \$ _____ Parking Per Month \$ _____

Applicant's Signature: _____ DATE: _____

Property Manager: _____ DATE: _____