



Calhoun Property Management
 P.O. Box 95558
 Seattle, WA 98145
 phone) 206-659-3124
 fax) 206-322-3374
www.aPodment.com

This Section For Internal Use Only

Unit #: _____ Monthly Rent: \$ _____ Move In \$: _____

Property you're interested in: _____

*******Note: Calhoun Properties will only consider complete applications. Please fill out the sections below and sign at the end of the application. Make sure you write clearly and legibly!!**

APPLICANT INFORMATION

Last Name: _____ First Name: _____ Middle: _____

Social Security #: _____ DOB: _____ Email: _____

Contact Phone #: _____ Driver's License #: _____

RESIDENTIAL HISTORY

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

Manager's Name: _____ Phone #: _____

Dates of Occupancy: From _____ /to _____ Monthly Rental Payment: \$ _____

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

Manager's Name: _____ Phone #: _____

Dates of Occupancy: From _____ /to _____ Monthly Rental Payment: \$ _____

EMPLOYMENT AND INCOME

Current Employer: _____ Position: _____ How Long? _____

Monthly Income: _____ Supervisor: _____ Phone #: _____

Previous Employer: _____ Position: _____ How Long? _____

Monthly Income: _____ Supervisor: _____ Phone #: _____

PERSONAL INFORMATION

Vehicle: [] yes [] no Bike: [] yes [] no Do you use Public Transportation: [] yes [] no

Student Status: [] yes [] no Full time [] OR Part time [] School: _____

Working Status: [] yes [] no Full time [] OR Part time []

Employment Industry: Construction [] / Manufacturing [] / Wholesale [] / Retail [] / Services [] /
 Transportation/Utilities [] / Information/Technology [] / Finance or Professional [] / Public Service []

Monthly Income: _____ (approx.)

Commute Time to School or Work: [] 5-15 minutes / [] 16-25 min. / [] 26-35 min. / [] 36+ min.

How did you hear of our aPODments? [] Our Sign / [] Craigslist or Other / [] Current or Past Resident

Has any person that will reside at this residence:

- Ever been evicted? NO YES
 - If yes include month/yr & address below
- Ever receive a notice to pay rent or vacate and/or another unlawful detainer notice from a landlord? NO YES
 - Please describe circumstances:
- Ever been convicted of a civil or criminal offense? NO YES
 - Explain:
- Been a registered sex offender? NO YES
- Are you a smoker? NO YES
- Do you have a waterbed? NO YES *If yes, proof of waterbed insurance is required.*

For what date are you seeking occupancy? _____ Desired duration of lease? _____

Have you given notice of termination of tenancy to your current landlord? NO YES

Pet(s)? NO YES If yes, how many? _____ Type(s) _____ Licensed? NO YES
*Aquarium? NO YES *Certified Service Animal? NO YES

EMERGENCY CONTACT

Name: _____ Relationship: _____ Phone #: _____
Address: _____ City: _____ State: _____ Zip: _____

PERSONAL CONTACTS

Name: _____ Relationship: _____ Phone #: _____
Address: _____ City: _____ State: _____ Zip: _____
Name: _____ Relationship: _____ Phone #: _____
Address: _____ City: _____ State: _____ Zip: _____

NON-REFUNDABLE PROCESS FEE: \$0

In compliance with the Fair Credit Reporting Act and RCW 59.18.257(2), this is to inform that a credit investigation involving the statements made on this application for tenancy at the above property is being initiated. If you are denied tenancy due to your credit report, you may obtain a free copy of your report from the bureau it was obtained from within 60 days of denial. (*Equifax, Experian or TransUnion*). You may also have a right to dispute the accuracy of the report and/or add a consumer statement to the report.

I/We certify that to the best of my/our knowledge, all statements are true and complete. I/We further authorize to obtain credit reports, character reports, civil and/or criminal records, and rental history as needed to verify all the information put forth in this application or a copy of it. I/We are aware that an incomplete application causes delay in processing and may result in denial of tenancy. I/We understand that false, fraudulent or misleading information may be grounds for denial of tenancy and/or forfeiture of my rental or lease agreement.

Signed _____

Signed _____

Dated _____

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Please send or fax this completed application to:

**Calhoun Properties
PO Box 95558
Seattle, WA 98145
Fax: (206) 322-3374**

