SAVVY PROPERTIES, LLC 1341 NE ORENCO STATION PARKWAY HILLSBORO OR 97124 (503)860-4544

CREDIT/BACKGROUND CHECK INFORMATION

PLEASE BE SURE TO PROVIDE A CURRENT E-MAIL ADDRESS ON THE RENTAL APPLICATION. YOU WILL BE CONTACTED BY LANDLORD STATION.COM TO APPROVE THE SCREENING OF YOUR CREDIT.

WE ARE UNABLE TO RENT PROPERTIES WITHOUT SCREENING CREDIT/BACKGROUND.

THANK YOU.



PERSONAL INFORMATION

RENTAL APPLICATION

Every occupant over the age of 18 MUST fill out a separate application (even if married). Please fill out this form COMPLETELY and sign where indicated.

FIRST NAME		MIDDLE			LAST			S.S.#			
DATE OF BIRTH		MARITAL STATU	s				DRIVERS LICENSE # STATE				
PHONE		HOME	MF			EXT. CELL			EMAIL		
PRESENT HOME ADDRESS	CITY/STATE/ZIP										
LENGTH OF TIME		PRESENT LANDLORD					LANDLORD PHONE				
REASON FOR LEAVING					AMOUNT OF RENT			Is your present rent up to date?			
PREVIOUS HOME ADDRESS	CITY/STATE/ZIP										
LENGTH OF TIME			PREVIOUS LANDLORD					LANDLORD PHONE			
REASON FOR LEAVING				AMOUNT OF RENT			Was your rent up to date?				
NEXT PREVIOUS HOME ADDRESS	S				CITY/STATE/ZIP						
LENGTH OF TIME			NEXT PREVIOUS LANDLORD					LANDLORD PHONE			
REASON FOR LEAVING						AMOUNT OF RENT			Was your rent up to date?		
PROPOSED OCCUPANT(S)										STALL WINDOW	
NAME	CCUPAIN	RELATIO	NSHIP			OCCUPATION			AC	iE	
NAME			RELATIONSHIP			OCCUPATION			AGE		
NAME			RELATIONSHIP			OCCUPATION			AGE		
NAME			RELATIONSHIP			OCCUPATION			AGE		
NAME			RELATIONSHIP			OCCUPATION			AGE		
								Y MALENS			
PROPOSED PE	T(S)	TVDE/DI									
			E/BREED			☐ INDOOR	. OUT				
NAME			TYPE/BREED			☐ INDOOR ☐ OUT		DOOR AGE			
TOURL			TYPE/BREED			■ INDOOR ■ OUTD			DOOR		
VEHICLE(S) IN	FORMA	TION									
YEAR	MAKE		MODEL		COLOR		PLATE #		STATE		
YEAR	MAKE MOD		MODEL	AODEL		COLOR			STATE		
EMPLOYMENT	6746190										
CURRENT EMPLOYER				OCCUPATION			HOURS/WEEK				
SUPERVISOR				PHONE EXT:				YEARS EMPLOYED			
ADDRESS				CITY/STATE/ZIP							
CURRENT EMPLOYER				OCCUPATION				HOURS/WEEK			
SUPERVISOR				PHONE EXT:				YEARS EMPLOYED			
ADDRESS				CITY/STATE/ZIP							
INCOME	real years where the	nige weaken						NO SECTION		FINANCE AND ADDRESS OF THE PARTY OF THE PART	
INCOME	SOURCE				PROOF OF INCOME						
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INCOME 2010 ezLandlordForms	12							ritt	J. J. MCON	Page 1 of 2	



RENTAL APPLICATION

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	110	ase IIII O	it this form COMPLE	ETELT and	sign where indic	ated.				
CREDIT CARD / FIN	ANC	IAL IN	IFORMATION	1						
CAR LOAN LIEN HOLDER	BALANCE OWED		MONTHLY PAYMENT		CREDITOR'S PHONE #					
CREDIT CARD COMPANY	BALANCE OWED		MONTHLY PAYMENT		CREDITOR'S PHONE #					
CREDIT CARD COMPANY	BALANCE OWED		MONTHLY PAYMENT		CREDITOR'S PHONE #					
CREDIT CARD COMPANY	BALANCE OWED		MONTHLY PAYMENT		CREDITOR'S PHONE #					
CHILD SUPPORT/ OTHER CREDIT OWED	BALANCE OWED		MONTHLY PAYMENT		CREDITOR'S PHONE #					
BANK ACCOUNT NAME OF BANK			BALANCE		MONTHLY PAYMENT		ACCOUNT NUMBER			
EMERGENCY / PERSO	ONAL	DEE	EDENICE INE	ODMAT			NOMBER			
EMERGENCY CONTACT	ONA	L REF	PHONE	ORMAI	ION	PHONE				
RELATION						CITY/STATE/ZI	710			
EMERGENCY CONTACT						PHONE	A CONTRACTOR OF THE CONTRACTOR			
RELATION										
PERSONAL REFERENCE			ADDRESS			CITY/STATE/ZIP				
RELATION			PHONE			PHONE				
			ADDRESS			CITY/STATE/ZIP				
PERSONAL REFERENCE						PHONE				
RELATION	ADDRESS CITY/ST			CITY/STATE/ZI	ATE/ZIP					
APPLICANT QUESTI	ONN	AIRE	/ AUTHORIZA	ATION						
Has applicant ever been sued for bills?	OYES	Оио	Has applicant ever been l		heir apartment by th	e sheriff?	O YES	О но		
Has applicant ever been bankrupt? OYES ONO			Has applicant ever been brought to court by another landlord?				OYES	Оио		
Has applicant ever been guilty of a felony? O YES O NO			Has applicant ever moved owing rent or damaged an apartment?				O YES	Оио		
Has applicant ever broken a Lease? OYES ONO			Is the total move-in amount available now (rent and deposit)?				O YES	ONO		
Applicant authorizes the landless to contest								The state of the s		
Applicant authorizes the landlord to contact All information is true, accurate and compl										
ANY PERSON OR FIRM IS AUTHORIZED TO								2000-100- 100- 100- 100- 100- 100- 100-		
List										
APPLICANT SIGNATURE					DATE			=		
If you have any	questions	about the	interpretation or legality of	of this form, ple	ase consult an attori	nev or other a	ualified p	erson.		
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NOTES:										
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