# SUBMIT TO: 331 Bryan Ave #8, Bremerton, WA 98312

Applicant's Complete Name: DL#/State issued:    DL#/State issued:		_Unit #	Rent Amou
SSN# DL#/State issued:  Tel# Email Address:  Other Occupant's Name, Age & Relationship. If any of the above noted occupants are currently married or separated but not living with their spouse, please note yes or not.  Complete Every Item on Application. Incomplete and/or Inaccurate Information May Result in Process Delay or Denia  CURRENT ADDRESS (Required Entry)  Street  Street  City State Zip City State Zip  Apt # Name of Apts Apt # Name of Apts  How Long(Mo/Da/Yr) From To  How Long (Mo/Da/Yr) From To  Pymts / Rent Pd To Amt  Landlord/Mgmt Co.  Address  Rent/Own/Lease  Tel# Rent/Own/Lease  Tel# Rent/Own/Lease  Tel# Rent/Own/Lease  Tel# Supervisor  Dept / Attached to Occupation Rank  Hire Date Monthly Salary Full Time Part Time  Address Suite City State/Zip  Prist Employer  Dept / Attached to Occupation Rank  Hire Date Monthly Salary Full Time Part Time  Address Suite City State/Zip  Address Suite City State/Zip  Address Suite City State/Zip  Prist Employer  Dept / Attached to Occupation Rank  Hire Date Monthly Salary Full Time Part Time  Address Suite City State/Zip  Address Suite City State/Zip  Prist State/Zip  Address Suite City State/Zip  Prist State/Zip  Address Suite City State/Zip  Prist State/Zip  Dept / Attached to Occupation Rank  Hire Date Monthly Salary Full Time Part Time  Part Time  Address Suite City State/Zip  Dept / Attached to Occupation Rank  Hire Date Monthly Salary Full Time Part Time  Part Time  Address Suite City State/Zip  Dept / Attached to Occupation Rank  Disability status and require special accommodations?  A Disability status and require special accommodations?  A reyou a full time student? Yes No If yes, list name(s)  Are you or any other household member a Registered or Unregistered Sex Offender? Yes No Ever had bedbuga or any other infestation? Yes No If yes, what type of infestation:  Auto/Year/Make/Lick: 1.)  Deal Contact State		Dat	e of Birth:
Tel#			
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Landlord/Mgmt Co.  Address  Tel# Rent/Own/Lease  Tel# Supervisor  Rank  Hire Date Monthly Salary Full Time Part Time  Address Suite City State/Zip  Tel# Supervisor  Rank  Hire Date Monthly Salary Full Time Part Time  Dept / Attached to Occupation Rank  Hire Date Monthly Salary Full Time Part Time  Address Suite City State/Zip  Additional Income (Interest, Child Support, Etc)  V Additional Income (Interest, Child Support, Etc)  V Bank Acct# Branch Tel#  V Pets? Yes No If yes, number, size, and type(s)  V Disability status and require special accommodations?  V Are you a fulltime student? Yes No  HAVE YOU OR ANY OTHER HOUSEHOLD MEMBER: Ever been evicted or refused to pay rent? Yes No  If yes, list name(s)  Ever used any other name(s)? Yes No If yes, what type of infestation:  Landlord/Mgmt. Co  Address Rent/Own/Lease  Rent/Own/L	Pymts / Rei	nt Pd To	Amt
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Dept / Attached to			
Dept / Attached toOccupation		*	
Hire Date	Tel#		Supervisor
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Hire Date			
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Ever used any other name(s)? Yes No If yes, list name(s) No   Ever used any other name(s)? Yes No If yes, list name(s)   Are you or any other household member a Registered or Unregistered Sex Offender? Yes No   Ever had bedbugs or any other infestation? Yes No If yes, what type of infestation:   Auto/Year/Make/Lic#: 1.) 2.)			9
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# Addendum (A) to Application for Tenancy

# LETTER OF AUTHORIZATION

To Whom It May Concern:

In compliance with the Fair Credit Reporting Act, State and Federal laws, this is to inform you and your house-hold members that an investigation involving the statements made on this application for tenancy are being initiated by LION Investigations, Inc., PO Box 277, Anacortes, Washington 98221, 360-588-1633. I certify that to the best of my knowledge all statements are "true and complete". I further authorize LION Investigations, Inc. to obtain EMPLOYMENT REFERENCES (including verifying salary), COURT, CRIMINAL & JUVENILE RECORDS, ARREST DETENTION INFORMATION and CHARACTER REFERENCES, GENERAL REPUTATION, MODE OF LIVING, and RENTAL REFERENCES as needed to verify all information put forth on this application and otherwise available regarding all applicants identified on this application (for minor children, the undersigned parent/guardian authorizes the above-information to be obtained on their behalf).

Furthermore I warrant the accuracy of all information contained on this rental application, including that relating to the other intended occupants of the subject property. I understand and agree that if subsequently a determination is made that I provided false or inaccurate information on the rental application it is a breach of the terms of any rental agreement signed based on that information and Owner and/or his/her agent may take legal action to terminate said Agreement. INVESTIGATIVE FEE IS NON-REFUNDABLE.

Applicant's Name (please print)		
Applicant's Signature	<u>.</u>	
Date of Authorization	-	
Manager's/Assistant Manager's Signature	-	
List All Children of Juvenile Age (12yrs-17yrs	s) Intended to Reside on the Rental Pr	operty:
(Please note there is an additional \$6.00 fee per J	fuvenile to be screened)	
Full Legal Name	Nickname(s)	Date of Birth
Full Legal Name	Nickname(s)	Date of Birth
Full Legal Name	Nickname(s)	Date of Birth

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# **CREDIT REPORT AUTHORIZATION**

#### THE FOLLOWING MUST BE COMPLETED IN FULL

and the second s		ADDKE99 IV	FURM	ATION	contract to the second	
Applicant's Last Name	First	1	M.I.	Social Security Numb	per Date of Birth	h
Present Address		City		State	Zip Code	
Day Phone (	) ,	Fax (		) .		
Night Phone (	)	Email:	•			
complete. I agree constitute invasion	T will be retrieve that a complete of privacy. I au	ed. I certify that investigation thorize <b>ORCA</b>	t the fa of all INFO	e informing you that acts set forth in this information on th RMATION, INC., PORT, as necessary	application are tr is application w PO Box 277, A	ue and vill not nacor-
Signature of Applica	unt			Da	te	
PDF to Word						

# NIELS G. NIELSEN SERVICES, Ltd. -PROPERTY MANAGEMENT

331 Bryan Avenue, Suite #8; Bremerton, WA 98312-4087 (360) 377-4498 FAX: (360) 479-3963

#### CRITERIA FOR TENANCY

## General Requirements:

- 1. Positive picture ID is required.
- 2. Application must be completely filled out and signed.
- 3. Application fee must be paid prior to processing the rental application. No personal checks will be accepted.
- 4. Applicant acknowledges and accepts that Niels G. Nielsen Services, Ltd. represents the owner of the property for which the applicant is applying.
- 5. If pet is allowed, proof of spay or neuter and pet fee is required.

# Rental Requirements:

- 1. Two years of verifiable residence history.
- 2. No established rental history will require an additional security deposit equal to one month's rent, or an approved co-signer residing in Washington State.
- 3. Home ownership will be verified through credit report or tax assessors' office.
- 4. Four (4) or more 3-Day notices within a 12-month period will result in denial.
- 5. Two (2) or more NSF checks within a 12 month period will require an additional security deposit equal to one month's rent, and no checks will be accepted.
- 6. Rental history which shows any unpaid past due rent will result in denial.
- 7. Any unlawful detainer action or eviction over three (3) years old, which has been paid, can be approved with an additional security deposit equal to one month's rent.
- 8. Rental history showing property damage of \$50.00 but less than \$500.00 may require an additional security deposit equal to one month's rent, only if the amount has been paid in full.
- 9. Rental history showing property damage of more than \$500.00 will result in denial.
- 10. Rental history, which shows disturbance complaints, will be denied.
- 11. Additional security deposit is required for any instance of unauthorized persons or pets in a unit previously rented by applicant.

### Income Requirements:

- 1. Monthly income must equal at least three (3) times the monthly rent.
- 2. If monthly income does not equal at least three (3) times the monthly rent, an additional security deposit equal to one month's rent may be required.
- 3. If a co-signer is required, their monthly income should equal at least five (5) times the monthly rent. Co-signer must be a resident of Washington State.
- 4. Current pay check stub is required.
- 5. Unemployed applicants must provide verifiable income or may pay 3 month's rent at move-in
- 6. Self-employed applicants will require proof of income from last 2 year's tax returns.

## Credit Requirements:

- 1. Outstanding bad debts being reported on credit report of more than \$100.00 but less than \$1000.00 will require an additional security deposit equal to one month's rent.
- 2. Outstanding bad debts being reported on credit report of more than \$1000.00 will result in denial.
- 3. Excessive collections (6 or more) may result in denial.
- 4. Outstanding debt to landlord or property management will result in denial.
- 5. Any applicant with a bankruptcy which has not been discharged will result in denial.
- 6. After a bankruptcy has been discharged, applicant must show six (6) months of positive credit.

### **Automatic Denials**

- 1. Conviction for Manufacture, distribution of a federally controlled substance, or lifetime registered sex offender.
- 2. Any collection filed by a property management company or landlord will result in denial, unless paid in full which will require additional security deposit equal to one month's rent.
- 3. Any applicant with unlawful detainer action or eviction within past three (3) years will result in denial.
- 4. Any current 3-day notice will result in denial.