

APPLICANT SCREENING AUTHORIZATION FORM 12/06

(please print clearly)

Please remember to have your applicants print neatly to reduce mistakes and typos.
City, State, Zip Codes, Social Security Numbers, Income and Birth dates are **REQUIRED!**
ONE FORM PER PERSON PLEASE, OR IT WILL BE REJECTED

Applicant Full Name: _____
(first, middle, last)

Social Security Number: _____ Date of Birth: _____

Combined income of those applying: _____

Current Address: _____
(street, city, state, zip)

Previous Address: _____
(street, city, state, zip)

I certify that the above information is correct and complete and hereby authorize you to make inquiries you feel necessary to evaluate my tenancy and credit standing including, but not limited to, a check of my credit. I understand that if I am denied tenancy due to my credit standing, I have the right to dispute the accuracy or completeness of any information in the credit report.

Applicant Signature: _____

Rental Owner

Monthly Rent for Unit (required): _____

Membership Name: YVONNE GIBSON Member ID#: QAA 3047

Manager's Name: _____ Complex: _____

Phone Number: _____ Fax Number: _____

Reports must be kept in the strictest confidence and must not be disclosed to the applicant.

Membership Signature: _____

Decision Point

Credit Report

(Only if approved through RTR)

Tenant Performance & Eviction History

Social Security Search

Criminal History in Oregon & Washington - Statewide

(includes violations through Federal offenses such as sex offender records)

Criminal Search in a single county anywhere in the US

(Please be advised that some counties impose a surcharge)

Nation Wide Criminal Report

(includes information from 42 states including: Delaware, Florida, Louisiana, Massachusetts, South Dakota, West Virginia, Wyoming and Colorado)

***PLEASE INDICATE YOUR PREFERENCE:

Phone ONLY _____ Phone & FAX _____ Phone & MAIL _____ Fax ONLY _____