## **PROPERTY MANAGEMENT PROFESSIONALS**

525 NE 6th, Grants Pass, OR. 97526 • Phone (541) 479-4991 • Fax (541)479-1639 55 S. 5th Street, Central Point, OR. 97526 Visit us on the web at: PMP-RENTALS.COM

## **Application For Tenancy**

NOTICE: Co-Applicant must complete a separate application.				DATE:			
The property located below is what I'm applying for							
PLEASE TELL US AI	BOUT YOURSELF						
Legal name		Contact number					
Date of Birth	Social Secur	Social Security # Email					
Legal Name of Co-App	licant						
Number of Dependents	(not Co-Applicant)	Ages of Dep	endents	Name(s)			
Do you intend to use:	□A musical Instrum	ent □Aquarium	□Piano	□Waterbed			
□ Pets(type)?	Size/Weigh	t Do	es anyone in yo	our household sm	oke? □yes □no		
NEAREST RELATIV	E TO BE NOTIFIED	IN CASE OF EMI	ERGENCY				
Name							
Address							
Phone		Relationship					
PLEASE GIVE YOU	D DECIDENCE HICT	ODV EOD THE D	ST 2 VEADS	(Diiid- d-			
CURRENT ADDRESS							
City  Reason for leaving							
· ·							
PREVIOUS ADDRESS							
Reason for leaving			_				
PREVIOUS ADDRESS	(if within 3 years)		Da	te moved In	Out		
Reason for leaving		Landlord or	Agent	Ph	none		
PLEASE GIVE YOU	R EMPLOYMENT IN	FORMATION					
YOUR STATUS:	Employed Full-Time	☐ Employed Part-T	ime 🗆 Studer	nt 🗆 Retired	□Unemployed		
EMPLOYER NAME _				Date Employed	I		
Employed as	S	Supervisor	E	Employer's Phone			

C:Ldocs

Salary \$	per If emp	loyed by the above	less than 6 months, give na	me and address of previous				
employer or school _	mployer or schoolPhone							
If there are other sour	ces of income you woul	d like us to conside	r, please list income source	and person who we				
could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless								
you want us to consider it in the application. Amount \$Source								
CO-APPLICANT ST	ATUS: □Employed For	ull-Time □Emplo	yed Part-Time □Student	□Retired □Unemployed				
EMPLOYER NAME			Date I	Employed				
Employed as		SupervisorEmployer's Phone						
Salary \$	per If em	ployed less than 6	months, give name and add	ress of previous				
employer or school _		Phone						
PLEASE LIST YOU	JR BANK AND CRED	IT REFERENCES	5					
Bank(s)	City-State	Branch	Type of Account	Account Number				
List All Outstanding	Debts / Credit cards (use	the back if you ned	ed more room)					
Debt	AmountMonthly Payment							
Debt		AmountMonthly Payment						
HAVE YOU EVER:	(check all that apply)	Filed for Bankrup	otcy 🗆 Been Evicted 🗆 W	illfully refused to pay rent				
when due $\Box$ Have yo	u (or any household mei	mber) been convict	ed of (or currently using) ar	ny illegal use,				
distribution or manufa	acturing of a Controlled	Substance. © Do	you (or any household men	mber) have a history of				
violence of any kind.	① Have you (or a hous	sehold member) be	een convicted of, pleaded gu	uilty to, or "no contest" to				
a misdemeanor or felo	ony (whether or not resu	alting in a conviction	on.)?	isehold member been				
convicted of or plead	ed guilty or "no contest"	to a misdemeanor	or felony involving sexual	misconduct? If you check				
any of the above plea	se explain							
DRIVERS LICENSE	NUMBERState							
Vehicle Make/Model		Year	Tag Number	State				
Vehicle Make/Model		Year	Tag Number	State				
Other vehicles								
PERSONAL REFE	RENCES							
Name	Ad	ldress	Phone					
Name	Δ.	ldress	Phon	p.				

 Applicant	 Co-Applicant
is acknowledged that incomplete, inaccurate or falsi- the application or subsequent termination of tenanc- Information provided may be made available to othe during application or if approved, during occupancy, application, applicant(s) does not acquire any rights	fied information shall be grounds for denial of y upon determination of such falsified data. er services or agencies for verification either By completing and returning this
the making of inguires necessary to evaluate the ap	,