



Castle Creek Apartment Homes
5200 Nob Hill Blvd
Yakima, WA 98908
(509) 965-4057

Name (s) Date of Birth Social Security No.

OTHERS WHO WILL OCCUPY DWELLING:
NAME RELATIONSHIP DATE OF BIRTH

TOTAL NUMBER OF PERSONS WHO WILL OCCUPY DWELLING, INCLUDING CHILDREN AND BABIES: _____

PLEASE ACCOUNT FOR PAST THREE (3) YEARS OF EMPLOYMENT. USE A SEPARATE PAPER IF NECESSARY.

PRESENT EMPLOYER _____ TELEPHONE; _____
ADDRESS _____ SUPERVISOR _____
POSITION _____ YEARS _____ DATES FROM: _____ To: PRESENT
INCOME _____ PER: _____ WEEK _____ MONTH _____ YEAR

PREVIOUS EMPLOYER _____ TELEPHONE; _____
ADDRESS _____ SUPERVISOR _____
POSITION _____ YEARS _____ DATES FROM: _____ TO: _____

PLEASE ACCOUNT FOR PAST THREE (3) YEARS OF RESIDENCE. USE A SEPARATE PAPER IF NECESSARY.

PRESENT ADDRESS _____
CITY/STATE/ZIP _____ TELEPHONE _____
RENT _____ HOW LONG THERE _____ DATES FROM: _____ TO: PRESENT
REASON FOR MOVING _____

LANDLORD/AGENT NAME _____ TELEPHONE _____

PREVIOUS ADDRESS _____
CITY/STATE/ZIP _____ TELEPHONE _____
RENT _____ HOW LONG THERE _____ DATES FROM: _____ TO: _____
REASON FOR MOVING _____

PREVIOUS LANDLORD/AGENT NAME _____ TELEPHONE _____

PREVIOUS ADDRESS _____
CITY/STATE/ZIP _____ TELEPHONE _____
RENT _____ HOW LONG THERE _____ DATES FROM: _____ TO: _____
REASON FOR MOVING _____
PREVIOUS LANDLORD/AGENT NAME _____ TELEPHONE _____

AUTOS	YEAR	MAKE	MODEL	COLOR	PLATE NO.	STATE
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____



EMERGENCY

CONTACT _____ RELATIONSHIP _____ PHONE _____

Have you ever had any evictions, judgments, liens or bankruptcy, or do you have a bankruptcy or eviction pending? _____

If yes, explain _____

Have you ever been convicted of a felony or misdemeanor, or do you have any charges pending? _____

If yes, explain _____

APPROVAL

I hereby make application for lease for the above describe premises and services, on the terms specified below, and deposit herewith the sum of **\$50** to cover the cost of a background report, credit report, and reference checks. It is understood that this fee is not returnable. I warrant that all statements above set forth are true, I further agree to abide by the rules, regulations and obligations which are included or attached to the lease.

The undersigned applicant hereby authorizes the Landlord/Agent and any consumer or credit reporting agency or bureau employed by it to Investigate my character, general reputation, mode of living, credit and financial responsibility and the statements made with this Application, and to secure credit, criminal and eviction reports for any and all applicants and occupants. I authorize the companies, agencies and persons named above to prove information o the Landlord/Agent regarding character and financial references as a prospective tenant.

If you accept this application, I understand I acquire no rights to an apartment until I submit a deposit in the amount equal to one month's rent to take the rental off the market., I shall within three (3) business days thereafter execute and deliver the deposit with you. If I fail or refuse to execute and deliver the said monies to you within the three-day period, there shall be no further liability on the part of the owner, or the undersigned in respect to said proposed lease or this application. ***I hereby waive all rights to return of this deposit and said deposit shall be retained as liquidated damages in the event that I choose not to enter into the agreement applied for herin.*** In the event said application for tenancy is not accepted deposit shall be returned to applicant.

This application shall not be binding upon the owner until accepted in writing. The delivery of a lease to the undersigned for signature shall not be construed as an acceptance of this application nor shall such lease be binding upon the owner until it has been executed on the owner's behalf and delivered to the undersigned.

Applicant's Signature _____ Date _____

Applicant's Signature _____ Date _____

APARTMENT DESIRED: _____ **1 BR** _____ **2 BR** _____ **3 BR DATE NEEDED:** _____

APPLICANT'S CELL PHONE # _____ SPOUSE'S CELL PHONE # _____

APPLICANT'S EMAIL _____ SPOUSE'S EMAIL _____

FOR OFFICE USE ONLY	
Address _____	Unit No. _____
Monthly Rental \$ _____	Damage/Security Deposit \$ _____
Lease Term: Start _____	End _____
Other Charges _____	
Remarks _____	First Month's Rent \$ _____
_____	Security Deposit \$ _____
_____	Application Fee \$ _____
_____	Balance Due \$ _____

DISCLOSURE AND AUTHORIZATION FOR CONSUMER REPORT

I understand that a consumer report, which may contain information regarding my employment rental history, credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, criminal history, or mode of living, may be requested and used in whole or in part for the purpose of serving as a factor in regard to my eligibility for tenancy.

I also acknowledge receipt of a copy of *A Summary of Your Rights Under the Fair Credit Reporting Act*. By my signature below, I hereby authorize a consumer report to be obtained.

Applicant _____
(Please print) (Last) (First) (Middle Initial)

Applicant _____
(Please print) (Last) (First) (Middle Initial)

Date of Birth _____ Social Security Number _____

Date of Birth _____ Social Security Number _____

Address _____

City/State/Zip _____

Drivers License or State ID Number _____

The above information is needed to increase the accuracy of information obtained and to reduce the possibility of being confused with another individual with the same name.

Applicant Signature _____ Date _____

Applicant Signature _____ Date _____