



Richard Beckman Realty Group, LLC  
 Property Management  
 1729 W Railroad Ave, PO Box Y, Shelton, WA 98584  
 360-432-9000

**Rental Application**  
 Rental Application Must Be  
 Completed By Each Applicant

Date	Time	Rent	There is a \$35.00 Non-Refundable Fee To Be Submitted With This Application. \$60.00 per Married Couple.
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Property Address	Ideal Move in date	Total # of Occupants
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<b>Applicant</b>	Name (Applicant) Last First Middle		Date of Birth	Social Security #	Driver's License
	Present Street Address City State Zip		Own or Rent	Landlord Name	Landlord Phone (Day)
	How Long Years & Months	Phone #	Email	Monthly Rent	Landlord Phone (Cell / Night)
	Former Street Address City State Zip			Former Landlord	Former Landlord Phone (Day)
	From	To	Landlord Address		Landlord Phone (Cell / Night)
	Other State or Countries you've lived in the past 5 years				Own or Rent
	Present Employer		Supervisor Name	Department	Phone
	Street Address City State Zip			How Long (Hire Date)	
	Monthly Salary	Position	Other Income 2nd Job	Source	
	Former Employer		Supervisor Name	Department	Phone
Street Address City State Zip			How Long (Hire Date)		

<b>References</b>	Have You Established Rental Credit? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		Have You Ever Been Evicted? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Date / /		
	List All Other Outstanding Debt (Attach Additional Sheet If Necessary)			Balance \$	Monthly Payments \$
	Relative / Parent		Address	Phone ( )	
	Personal Reference		Address	Phone ( )	
	Personal Reference		Address	Phone ( )	
Have You Or Any Other Person Who Will Be Occupying The Unit Ever Been Convicted Of, Pled Guilty Or No Contest To Any Felony Or Misdemeanor YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> WHO Where When					

<b>Other</b>	Other Occupants: Name:	Age & Date Of Birth	Automobiles	License No	Do you Have PETS? Number & Type _____
			Other Vehicles		Do You Intend To Use: <input type="checkbox"/> Waterbed <input type="checkbox"/> Aquarium <input type="checkbox"/> Musical Instruments _____
			Parking Spaces Needed		Do You Have Renters Insurance YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

Why Are You Vacating Your Present Place of Residents?	
Have You Given Legal Notice Where You Now Live? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	How Did you Hear About Our Property?

I certify that the above information is correct and complete and hereby authorize the Richard Beckman Realty Group, LLC (Lessor) to obtain a consumer credit report and or investigate Consumer Report which may include the checking of the applicants credit, income, employment, rental history, criminal court records and may include information as to his / her character, general reputation, personal characteristics, and mode of living.

In Compliance with the Fair Credit Reporting Act and the Washington State Residential Landlord tenant Act we are informing you that the Landlord intends to investigate the information that you have set forth on this Rental Application Form. This May include obtaining a credit report or other reports from a credit bureau or a tenant screening service confirming information that you have stated herein. You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as completed and accurate disclosure of the nature and scope of the investigation.

If application is approved, applicants will have 60 Hours from the time of notification to either execute a rental agreement and make all deposits required there under or make a deposit to hold the unit and execute a deposit receipt which will provide for the forfeiture of the deposit if applicants fail to occupy the unit. If applicants fail to timely take the steps required above, they will be deemed to have refused the unit and the next application for the unit will be processed.

\*BY SIGNING THIS FORM, I HEREBY GIVE AUTHORIZATION FOR RELEASE OF THIS INFORMATION. \*BY SIGNING THIS FORM, APPLICANT IS ACKNOWLEDGING RECEIPT OF "The LAW OF REAL ESTATE AGENCY" PAMPHLET for Washington State.

Applicant Signature X Lessor Signature X Picture ID Verified (Initial) \_\_\_\_\_

RICHARD BECKMAN REALTY GROUP, LLC  
PROPERTY MANAGEMENT  
114 West Alder/ P.O. Box "Y" Shelton, WA 98584  
Phone: 360-432-9000 Fax: 360-426-1645

CREDIT REPORT, EMPLOYMENT & RENTAL VERIFICATION AUTHORIZATION

DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

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