APPLICATION TO LEASE APARTMENT

Vermont Inn Apartments – 2721 Fourth Avenue – Seattle, WA 98121 – 206-4410101

Please complete application fully and make all entries legible. We cannot process incomplete applications.

Full Name:	Social Security Number:				
Phone Number:	<mark>Date of Birth</mark> :		<mark>DL/IDNumber</mark> :		
Your Address:	City:		State:	Zip:	
<mark>Email:</mark>					
<mark>About Your Present La</mark> i	ndlord:				
Name of Landlord or Po					
Phone Number:		How Long?		Monthly Rent:	
Address:	Cit	y:	State:	Zip:	
About Your Previous Lo	ındlord:				
Name of Previous Land		gency You Pre	viously Rented		
Phone #:	From:	To:	MonthlyRent:_		
Address:	City:		State:	Zip:	

Present Employer: Position: Name of Supervisor: Phone# How Long? Wages: \$ Per (circle one) Week Month Year Fax #:_____ Average Number of Hours Per Week: **About Your Previous Employer:** Previous Employer: From: To: Supervisor: Phone# Wages: circle one: Week Month Year **About Your Income:** Indicate All Other Sources of Income. Circle ALL That Apply: Alimony, Child Support, Welfare, Pensions, Unemployment Compensation, Social Security, SSI, Disability or any other regular or periodic payments. Type of Income: _____AnnualAmount:\$_____Contact: ____Phone: ____ Type of Income: _____ Annual Amount:\$_____ Contact: _____ Phone: _____ Do You Have A Checking Account? Name of Bank: Balance:\$_____ Do You Have A Savings Account?_____ ____Balance:\$____Other than what you have already listed, Name ofBank: do you have any other income? ____ If "yes," please show amount(s), source(s), contact person and phone number:_____

About Your Present Employer:

Additional Information:
Please Answer "yes" or "no." Have you filed for bankruptcy? In the past 12 months,
have you been served any of the following: Unlawful Detainer? Three Day Notice to
Pay or Vacate? Ten Day Notice to Comply or Vacate? Notice To Terminate
Tenancy?Have you been evicted?If you have answered "yes" to any of the
above, please provide
details:
Your Emergency Contact:
Name of Contact:
Relationship To You
Phone Number:
Certification:
I certify that my gross income from all sources LAST YEAR was: \$and that my current
monthly gross income from all sources is \$ I agree to provide upon request the necessary
documentation as required to substantiate the income I show on this application. I further understand that
approval of this application is based on information that I have provided and that my failure to provide the
requested information will result in the denial of this application. I also understand that there is a \$45 non-
refundable application processing fee due when this application is submitted for processing. My signing of this application is authorization for the Vermont Inn to conduct a background screening and that such authorization is
not an invasion of my privacy. This background check is for the purpose of identifying any potential causes of
denial based on credit, collections, defaults, registry information, open bankruptcies or eviction(s).
Notice To Applicant:
"The landlord is prohibited from requiring disclosure, asking about, rejecting an applicant or taking an adverse
action based on any arrest record, conviction record or criminal history, except for registry information as described
in subsections 14.09.025.A,3, 14.09.025.A.4., and 14.09.025.A.5. and subject to the exclusions and legal
requirements in section 14.09.115." The registry information in the quoted language is defined as information
solely obtained from a county, state-wide, or national sex offender registry that can include information as to the person's physical description, address, and conviction description and dates. The applicant may provide any
supplemental information related to rehabilitation, good conduct, and facts or explanations about their registry
information.
Signature of Applicant:
Date:
The Vermont Inn does business in accordance with fair housing laws.