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:			Soc	Social Security Number:		
Phone Number:						
Your Address:		City:		State:	Zip:	
About Your Present Land	dlord:					
Name of Landlord or Per	son/Agency Yo	u Now Rent Fr	om:			
Phone Number:		_ How Long?		Monthly Rent:		
Address:	City:		State:_	Zi	p:	
About Your Previous Lar						
Name of Previous Landlo	ord or Person/A	Agency You Pre	viously Rente	ed From:		
Phone Number:		_ From:	To:	Monthly I	Rent:	
About Your Present Emp	oloyer:					
Present Employer:		_ Position:		Name of Super	visor:	
How Long?	_Wages: \$	Per (circle one) Week Month Year Fax Number:				
Average Number of Hou	rs Per Week:					
About Your Previous Em	ployer:					
Previous Employer:						
From: To:	Name o	of Supervisor:_		Pho	one:	
Wages: Per: circle one: \	Week Month Year					
About Your Income:						
Indicate All Other Source	es of Income. C	Circle ALL That A	Apply: <i>Alimo</i>	ny, Child Suppo	rt, Welfare, Pensions,	
Unemployment Compens	sation, Social S	ecurity, SSI, Dis	ability or any	other regular	or periodic payments.	
Type of Income:	Annual A	\mount: \$	Contac	t:	Phone:	
Type of Income:	Annual .	Amount: \$	Contac	t:	Phone:	
Do You Have A Checking	Account?	Name of B	ank:		Balance:\$	
Do You Have A Savings A	.ccount?	Name of B	ank:		Balance:\$	
Other than what you have	e already liste	d, do you have	any other in	come?	If "yes," please show	
amount(s), source(s), co	ntact person ar	nd phone numb	oer:			
Additional Information:						
Please Answer "yes" or "	no." Have vou	filed for bankr	uptcv?	In the past	12 months, have you	
been served any of the f						
Vacate? Ten Da						
Have you been evicted?						
details:				,	, i	

Your Emergency Contact:						
Name of Contact:	Relationship To You					
Phone Number:						
Certification:						
I certify that my gross income from all sources LAST YEAR w	as: \$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 in	come I show on this application. I further					
understand that approval of this application is based on info	ormation 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 \$35 non-refundable application p	processing fee due when this application is					
submitted for processing. My signing of this application is a	uthorization for the Vermont Inn to conduct					
a background screening and that such authorization is not a	n invasion of my privacy. This background					
check is for the purpose of identifying any potential causes of	of denial based on credit, collections,					
defaults, registry information, open bankruptcies or eviction	n(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 phys	sical description, address, and conviction					
description and dates. The applicant may provide any supple	emental information related to					
rehabilitation, good conduct, and facts or explanations abou	ut their registry information.					
Signature of Applicant:						
						
Date:						
The Vermont Inn does business in accordance with fair housing laws.						
The vermone init does business in decorda	ince with juli housing laws.					