

<h2 style="text-align: center; margin: 0;">Milbourn Properties Rental Application</h2> <p style="text-align: center; margin: 0;">P.O. Box 5844 Lynnwood, Washington 98046-5844 Phone: 425-327-4771 Fax: 425-672-2046</p>	<h2 style="margin: 0;">NWIS</h2> <p style="margin: 0; font-size: small;">Tenant Investigation Services Inc. Tenant Screening • Employee Background Investigations</p>
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<b>APPLICANT - LAST NAME</b>	<b>FIRST</b>	<b>INIT.</b>	<b>DRIVER'S LICENSE #</b>	<b>SOCIAL SECURITY #</b>	<b>DATE OF BIRTH</b>
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<b>SPOUSE</b> <input type="checkbox"/> or <b>CO-TENANT</b> <input type="checkbox"/> <i>(If Co-Tenant, separate application must be completed)</i>	<b>SOCIAL SECURITY #</b>	<b>DATE OF BIRTH</b>
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Identification Verified? Yes <input type="checkbox"/> No <input type="checkbox"/>	Pet? Yes <input type="checkbox"/> No <input type="checkbox"/>	Waterbed? Yes <input type="checkbox"/> No <input type="checkbox"/>
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LIST ALL OTHER PROPOSED OCCUPANTS	NAME:	AGE:	RELATIONSHIP:

<b>RESIDENCE HISTORY</b>	IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE ALL INFORMATION IS CORRECT AND COMPLETE. MISSING OR INCOMPLETE INFORMATION IS GROUNDS FOR REJECTION.
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CURRENT ADDRESS	PREVIOUS ADDRESS	FORMER ADDRESS
Street Number _____ Name and Apt. # _____	Street Number _____ Name and Apt. # _____	Street Number _____ Name and Apt. # _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Home # _____	Home # _____	Home # _____
Work # _____	Work # _____	Work # _____
Rent \$ _____ Deposit \$ _____	Rent \$ _____ Deposit \$ _____	Rent \$ _____ Deposit \$ _____
Moved In: _____ Moved Out: _____	Moved In: _____ Moved Out: _____	Moved In: _____ Moved Out: _____
Landlord: # _____	Landlord: # _____	Landlord: # _____
Reason for leaving: _____	Reason for leaving: _____	Reason for leaving: _____

<b>EMPLOYMENT</b>	INFORMATION ON EMPLOYMENT HISTORIES MUST BE COMPLETE AND ACCURATE IN ORDER TO VERIFY INCOME. PLEASE LIST PHONE NUMBER OF PERSON TO VERIFY EMPLOYMENT.
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PRESENT EMPLOYER	PREVIOUS EMPLOYER	SPOUSE'S EMPLOYER
NAME OF COMPANY OR EMPLOYER _____	NAME OF COMPANY OR EMPLOYER _____	NAME OF COMPANY OR EMPLOYER _____
Phone: _____	Phone: _____	Phone: _____
Position: _____	Position: _____	Position: _____
Monthly Earnings \$: _____	Monthly Earnings \$: _____	Monthly Earnings \$: _____
Start Date: _____	Start Date: _____	Start Date: _____

VEHICLE INFORMATION	# Vehicles _____ License _____ State _____	# Vehicles _____ 2 <sup>nd</sup> Auto License _____ State _____
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PERSONAL INFORMATION		
Have you ever used another social security number?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever filed for bankruptcy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a crime?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a full time student?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you require special accommodations?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been evicted from an apartment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

EMERGENCY CONTACT			
Name of Nearest Relative/Contact	Relationship	Address, City, State, Zip	Phone

I understand that I acquire no rights in an apartment until I sign an agreement in the form submitted to me and make a deposit of \$ \_\_\_\_\_ on the apartment I have selected. This deposit will be held in accordance with the rental agreement. In return, for the landlord's holding the apartment for me, I hereby waive all rights to the return of this deposit. The deposit will be held as liquidated damages in the event that I do not choose to enter into the agreement applied to herein. In the event that this agreement is not accepted the deposit will be returned to the applicant.

**NON-REFUNDABLE PROCESS FEE \$ \_\_\_\_\_**  
 In compliance with the FAIR CREDIT REPORTING ACT, this is to inform you that a credit investigation involving the statements made on this application for tenancy at this apartment complex is being initiated. I/We certify that to the best of my/our knowledge, all statements are true and complete. I/We further authorize BMAB Inc. to obtain credit reports, character reports, criminal reports and rental history as needed to verify all information put forth in this application.

Signed _____ Applicant	Signed _____ Spouse or Co-Applicant	Date _____
Landlord _____	Title _____	Date _____

(THIS SPACE FOR LANDLORD'S USE ONLY)	CO-SIGNER: <input type="checkbox"/>	SECTION 8: <input type="checkbox"/>	CO-APPLICANT: <input type="checkbox"/>
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