

Schimpf Properties LLC
P.O. Box 66007
Portland, Oregon 97290
Phone 503-658-7255 Fax 503-558-0242

Monthly Rent \$1300.00
Security Deposit \$1300.00
Sorry No Pets N/A
3336-3344 SE Cesar E Chavez Portland, Or 97202

Information provided may be made available to other services or agencies for verification either during application or if approved, during occupancy. By completing and submitting this application, applicant does not acquire any rights in any rental unit.

1. APPLICANT #1

Legal Name: _____
Date of Birth _____ - _____ - _____ Soc. Sec. # ____ / ____ / ____
Driver’s License # _____ State _____
Vehicle Make _____ Model _____
Year _____ Plate # _____

1. APPLICANT #2

Legal Name: _____
Date of Birth _____ - _____ - _____ Soc. Sec. # ____ / ____ / ____
Driver’s License # _____ State _____
Vehicle Make _____ Model _____
Year _____ Plate # _____

2. RESIDENCE HISTORY— APPLICANT #1

Present Address: _____

City State Zip Move In ____ Out ____
Home Phone # _____ Work Phone # _____
Cell Phone # _____ Email _____
Own or Rent? _____ Monthly Payment _____
Name of Landlord or Mortgage Co.: _____
Address: _____

Phone # _____

2. RESIDENCE HISTORY— APPLICANT #2

Present Address: _____

City State Zip Move In ____ Out ____
Home Phone # _____ Work Phone # _____
Cell Phone # _____ Email _____
Own or Rent? _____ Monthly Payment _____
Name of Landlord or Mortgage Co.: _____
Address: _____

Phone # _____

3. PREVIOUS RESIDENCE — APPLICANT #1

Previous Address _____

City State Zip Move In ____ Out ____
Own or Rent? _____ Monthly Payment _____
Name of Landlord or Mortgage Co.: _____
Address: _____

Phone # _____

3. PREVIOUS RESIDENCE — APPLICANT #2

Previous Address _____

City State Zip Move In ____ Out ____
Own or Rent? _____ Monthly Payment _____
Name of Landlord or Mortgage Co.: _____
Address: _____

Phone # _____

4. INCOME DESCRIPTION — APPLICANT #1

Employer Name _____
Address _____
Phone _____ Position _____
Monthly Gross \$ _____
Monthly Take Home \$ _____ Date of Hire _____
Other Income _____ Monthly \$ _____

Total Monthly Take Home \$ _____

4. INCOME DESCRIPTION — APPLICANT #2

Employer Name _____
Address _____
Phone _____ Position _____
Monthly Gross \$ _____
Monthly Take Home \$ _____ Date of Hire _____
Other Income _____ Monthly \$ _____

Total Monthly Take Home \$ _____

5. CREDIT / FINANCIAL REFERENCES — APPLICANT #1

Circle all that apply
Felony? Yes / No Bankruptcy? Yes / No
Foreclosure? Yes / No Eviction? Yes / No
***If you answered yes to any of the above please attach explanation.
Creditor _____
Address _____
Monthly Payment \$ _____ Balance \$ _____
Creditor _____
Address _____
Monthly Payment \$ _____ Balance \$ _____

5. CREDIT / FINANCIAL REFERENCES — APPLICANT #2

Circle all that apply
Felony? Yes / No Bankruptcy? Yes / No
Foreclosure? Yes / No Eviction? Yes / No
***If you answered yes to any of the above please attach explanation.
Creditor _____
Address _____
Monthly Payment \$ _____ Balance \$ _____
Creditor _____
Address _____
Monthly Payment \$ _____ Balance \$ _____

6. EMERGENCY CONTACT

Name _____ Relation _____
Phone # _____

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Name _____ Relation _____
Phone # _____

7. OTHER IMPORTANT INFORMATION

List names & date of birth for all persons to occupy the unit:
Name _____ DOB _____
Name _____ DOB _____
Name _____ DOB _____

7. OTHER IMPORTANT INFORMATION

Circle all that apply
Do you have any animals? Yes / No Waterbed? Yes / No
Do you intend to use a musical instrument? Yes / No
Why are you vacating place of residence? _____

8. APPLICANT CERTIFICATION OF ACCURACY / SIGNATURES

Applicant (s) hereby certify that the information is true and correct and hereby authorize landlord / agent to make any necessary inquires deemed necessary to evaluate the application for tenancy and credit standing. Applicant understands and accepts that any information provided that is incomplete, inaccurate or falsified shall be grounds for denial of the application or subsequent termination of tenancy upon determination of such falsified information.

8. APPLICANT CERTIFICATION OF ACCURACY / SIGNATURES

APPLICANT #1 _____ DATE _____
APPLICANT #2 _____ DATE _____