RENTAL APPLICATION (PLEASE PRINT)



| 1 | Date of this application: | | | | | | |
|---|--|--|--|--|--|--|--|
| 2 | Type and size of Apartment desired: | | | | | | |
| 3 | 3 Price range of residence desired: Desired date of occupancy: | | | | | | |
| 4 Do you have a waterbed? Piano/organ? Smoke? | | | | | | | |
| 5 | Type and size of Apartment desired: Price range of residence desired: Do you have a waterbed? If YES, complete Pet Profile. | | | | | | |
| | , | | | | | | |
| 7 | PERSONAL INFORMATION | | | | | | |
| 9 | Applicant's full name: | | | | | | |
| 10 | | | | | | | |
| 11 | | | | | | | |
| 12 | Date of Birth: | | | | | | |
| 13 | Social Security No: | | | | | | |
| 14 | | | | | | | |
| 15 | Telephone No: | | | | | | |
| 16 | | | | | | | |
| 17 | | | | | | | |
| 18 | Have you or any member of your household ever been convicted of or pleaded guilty or "no | | | | | | |
| 19 | contest" to a felony? Yes No | | | | | | |
| 20 | Have you or any member of your household ever been convicted of or pleaded guilty or "no | | | | | | |
| 21 | contest" to a misdemeanor involving sexual misconduct? Yes No | | | | | | |
| 22 | If yes, please describe: | | | | | | |
| 23 | If yes, please describe: | | | | | | |
| | | | | | | | |
| 25 | RESIDENCE HISTORY | | | | | | |
| 27 | We require two (2) rental references or two (2) full years of rental history, whichever is greater. | | | | | | |
| 28 | Please list your actual landlord or property manager, NOT ROOMMATES | | | | | | |
| 29 | Present Address: | | | | | | |
| 30 | Present Address: To Amount of rent: Phone/Cell: | | | | | | |
| 31 | THOUG/CEII. | | | | | | |
| 32 | Reason for leaving: | | | | | | |
| 33 | Previous Address: | | | | | | |
| 34 | Previous Address: How long there?: From To Amount of rent: Previous Landlord: Phone (Call): | | | | | | |
| 35 | Filotie/Cell. | | | | | | |
| 36 | Reason for leaving: | | | | | | |
| 37 | Please account for any "gaps" in this rental history: | | | | | | |
| 38 | | | | | | | |
| 39 | | | | | | | |
| 40 | U please explain: | | | | | | |
| 41 | | | | | | | |
| 43 | PERSONAL REFERENCES (No relatives) | | | | | | |
| 45 | Name How long Address Phone/Cell # | | | | | | |
| 46 | THOTIC/OCIT | | | | | | |
| 47 | 1 | | | | | | |
| 48 | 3 | | | | | | |
| | | | | | | | |

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| 48 49 | S LIST ALL VERIFIABLE SOURCES OF INCOME YOU WISH TO HAVE CONSIDERED IN THE EVALUATION OF YOUR APPLICATION: | | | | | | |
|--|--|--|---------|--------------------------|--|--|--|
| | Source 1 2 3 | | | Verification phone/cell# | | | |
| 56 | 3CREDIT REFERENCES | | | | | | |
| 58 59 60 | 2 | | Address | Phone/Cell # | | | |
| 62 63 | Dalik | | | | | | |
| 66 | AUTOMOBILE(S): | | Voor | 04-4-11: | | | |
| 70 71 72 | 0 EMERGENCY CONTACT INFORMATION: | | | | | | |
| 75 77 | Name: Address: Phone: | | | | | | |
| 80 81 82 83 84 85 86 87 | I expect to reside on the premises: 6 months or less 1 year 2 years or more. The statements above are true and correct. I hereby verify that I am 18 years or older, or otherwise competent to enter into a binding rental contract and I understand that I will be fully responsible for the terms of the rental contract. I hereby authorize the landlord, his agent or staff to contact any persons, corporations, employers, agencies, offices, groups or organizations to obtain any information, credit report or material which is deemed necessary to verify the information and statements in the application. In the event the application is approved and I desire to rept the premises. Lagree to fill out and | | | | | | |
| 91 | SIGNATURE: | | DATE: | | | | |

NOTE: Unless otherwise expressly stated the term "Days" means calendar days and not business days. Business days are defined as all days except Sundays and holidays. Any performance which is required to be completed on a Saturday, Sunday or a holiday can be performed on the next business day.

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PET PROFILE



| | Applicants Name(s) | | | | |
|----|---|--|--|--|--|
| | Pet #1 | | | | |
| 6 | Name | | | | |
| | Breed | Attach Distance of Dat II | | | |
| 10 | Age | Attach Picture of Pet Here (Pictures will not be returned) | | | |
| 12 | □ Male □ Female | | | | |
| 14 | Weight | | | | |
| 16 | How long have you owned the pet? | | | | |
| 18 | Shots? ☐ Yes ☐ No Shot Record provided? ☐ Yes | □ No City/County License? □ Yes □ No | | | |
| 20 | Pet #2 | | | | |
| 22 | Name | | | | |
| 24 | Breed | Add a la Dividio de Di | | | |
| 26 | Age | Attach Picture of Pet Here (Pictures will not be returned) | | | |
| 28 | □ Male □ Female | | | | |
| 30 | Weight | | | | |
| 32 | How long have you owned the pet? | | | | |
| 34 | Shots? ☐ Yes ☐ No Shot Record provided? ☐ Yes | □ No City/County License? □ Yes □ No | | | |
| 36 | | | | | |
| 38 | Signature | Date | | | |
| | Signature | | | | |
| 43 | Form needs to be submitted with rental application before | re a decision on the application will be made. | | | |

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BAYCROFT'S PROPERTY MANAGEMENT INC P.O. BOX 988, WHITEHALL, MT 59759-0988 (406) 560-3274

<u>baycroftpm@hotmail.com</u> www.baycroftproperty.com

AGENCY DISCLOSURE

WENDY C HEAVRIN IS A LICENSED REAL ESTATE PROPERTY MANAGER IN THE STATE OF MONTANA AND IN THIS TRANSACTION IS THE AGENT OF THE PROPERTY OWNER AND IS THEIR REPRESENTATIVE.

A PROPERTY MANAGER IN THE STATE OF MONTANA IS OBLIGATED TO THE TENANT TO DISCLOSE ANY ADVERSE MATERIAL FACT THAT CONCERN THE SAFETY OF THE PROPERTY, DISCLOSE TO THE TENANT WHEN THE AGENT HAS NO PERSONAL KNOWLEDGE OF THE VERACITY OF INFORMATION REGARDING ADVERSE MATERIAL FACTS THAT CONCERN THE PROPERTY, ACT IN GOOD FAITH WITH THE TENANT, MUST COMPLY WITH ALL OF THE APPLICABLE FEDERAL, STATE, AND LOCAL LAWS, RULES AND REGULATIONS.

| APPLICANT'S SIGNATURE | DATE | |
|----------------------------|------|--|
| APPLICANT'S SIGNATURE | DATE | |
| PROPERTY MANAGER SIGNATURE | | |

\$35.00 APPLICATION FEE-application will not be processed without paid fee.

***INCLUDE A CLEAR COPY OF YOUR

DRIVER'S LICENSE

***INCLUDE YOUR CURRENT MAILING ADDRESS

***Include a clear copy of check

stubs/documents verifying your income.

Property Address desired: