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 Email [air@airfactz.com](mailto:air@airfactz.com)

Type of Report  
 FULL  
 STREAMLINE  
 SHORT  
 CO-SIGNER  
 CRIMINAL ONLY  
 OTHER \_\_\_\_\_

MOVE IN DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
 RENT \$ \_\_\_\_\_  
 APARTMENT # \_\_\_\_\_  
 Visual proof of Drivers License or State I.D.  YES  NO

MANAGEMENT COMPANY	RENTAL/UNIT ADDRESS	REQUESTING AGENT	TELEPHONE #	FAX #

APPLICANT IS:  APPLYING ALONE  HAS CO-APPLICANTS (Include the name of the co-applicants and their relationship to you)

**\*\*INCOMPLETE APPLICATION CAUSES A DELAY IN PROCESSING\*\***

**APPLICANT INFORMATION**

APPLICANT'S LAST NAME	FIRST NAME	MIDDLE/SUFFIX	SOC SEC#	DRIVERS LICENSE #	STATE	DOB
APPLICANT'S HOME PHONE		CELL PHONE	OTHER NAMES USED			

**CURRENT RESIDENCE**

(1) Applicant's Present Address	Apt.#	City	State	Zip	Move-In Date	Email	Monthly Payment \$
Present Landlord/Complex	<input type="checkbox"/> Mortgage Co.	<input type="checkbox"/> Apartment Community	<input type="checkbox"/> Other	City	State	Zip	Landlord Phone ( ) Landlord Fax ( )

**PREVIOUS RESIDENCE HISTORY**

(2) Applicant's Previous Address	Apt.#	City	State	Zip	Move-In Date	Move-Out Date	Monthly Payment \$
Previous Landlord/Complex	<input type="checkbox"/> Mortgage Co.	<input type="checkbox"/> Apartment Community	<input type="checkbox"/> Other	City	State	Zip	Landlord Phone ( ) Landlord Fax ( )
(3) Applicant's Previous Address	Apt.#	City	State	Zip	Move-In Date	Move-Out Date	Monthly Payment \$
Previous Landlord/Complex	<input type="checkbox"/> Mortgage Co.	<input type="checkbox"/> Apartment Community	<input type="checkbox"/> Other	City	State	Zip	Landlord Phone ( ) Landlord Fax ( )

**EMPLOYMENT HISTORY**

(1) Applicant's Present Employer	City	State	Zip	Position	Phone ( )	Gross MONTHLY salary \$	Employment Dates
(2) Applicant's Previous Employer	City	State	Zip	Position	Phone ( )	Gross MONTHLY salary \$	Employment Dates

**ADDITIONAL INCOME**

*Additional income such as child support, alimony or separate maintenance need not be disclosed unless such additional income is to be included for qualification hereunder.*  
 Amount of \$ \_\_\_\_\_ Frequency \_\_\_\_\_ Source \_\_\_\_\_

**IMPORTANT INFORMATION**

Name of Emergency Contact	Relationship	Address	City	State	Zip	Phone ( )

<p>Have you ever been convicted of any crime? (Do not list any offense for which you have successfully completed a deferred sentence.)  <input type="checkbox"/> NO <input type="checkbox"/> YES Offense/Charge: _____          Level of Offense: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Violation          Court/Location: _____ Case #: _____</p>	<p>Have you ever been evicted from any residence? If yes, list when, address and reason. <input type="checkbox"/> NO <input type="checkbox"/> YES Date: _____          Address: _____          Reason: _____</p>
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I understand I acquire no rights in an apartment until I sign this agreement and submit a holding fee in the amount of \$ \_\_\_\_\_. If my residency is approved and I sign an apartment rental agreement, this fee shall be credited to my first month's rent and/or security deposit. If my residency is approved but I do not sign an apartment rental agreement, then this fee shall be forfeited to the landlord as liquidated damages for holding an apartment at \_\_\_\_\_. If my residency is not approved then this fee shall be returned to me.

**NON-REFUNDABLE APPLICATION FEE EARNED ON RECEIPT. \$ \_\_\_\_\_ PAYABLE TO AIRFACTZ.**

In accordance with State and Federal laws you are hereby notified that an investigation may be made by AIRFACTZ of the information together with information as to your character, general reputation, personal characteristics, and mode of living. You have the right to dispute the accuracy of information provided by AIRFACTZ or by the entities you have disclosed above, and, upon written request, the right to a complete and accurate disclosure of the nature and scope of the investigation and/or a written summary of your rights under the Fair Credit Reporting Act. Please direct all inquiries to AIRFACTZ, P.O. Box 141875 Spokane, WA 99214-0344. The venue for any legal action or proceedings related to this transaction, or breach of contract, or default, whether a lawsuit is filed or not, shall be properly laid in Spokane County, Washington. I certify that to the best of my knowledge all statements made herein are true and correct. I authorize AIRFACTZ to obtain such credit reports, character reports, verification of criminal history, and verification of rental and employment history and provide an investigative report to the undersigned landlord. I further understand that false, fraudulent or misleading information disclosed above may be grounds for denial of tenancy or subsequent eviction. **I am aware that an incomplete application causes a delay in processing and may result in denial of residency.**

Signed \_\_\_\_\_  
 Applicant Date

The undersigned agent for the above-referenced landlord certifies that the information sought herein or in any consumer report prepared by AIRFACTZ is for the purpose of evaluating the applicant's residency and no other purpose.

Signed \_\_\_\_\_



It is the Policy of the owners and managers of \_\_\_\_\_ not to discriminate against anyone in any respect in the rental of apartment because of race, nationality, religion, sex, disability or family status / having children under the age of 18.