

\$50.00 – Application Fee per Individual or Married Couple
Cashiers Check or Money Order Only

Investment Property

Management, LLC

Address of Rental

208-667-2550 Fax: 208-664-4449

500 N. Government Way #200, Coeur d Alene, Idaho 83814

Please use separate sheet for each applicant

Date of Birth _____

PERSONAL INFORMATION

Name _____ SS Number _____ D.L Number _____
Present Address _____ From _____
City/State/Zip _____ Email _____
Landlord/Agent _____ Landlord Phone _____
Previous Address _____ From _____ To _____
City/State/Zip _____
Landlord/Agent _____ Landlord Phone _____
Other Occupants _____ Number _____ Relationship _____ Smoker _____ Yes _____ No _____
Animals _____ How Many _____ Type _____
Vehicle Make _____ Year _____ Model _____ Color _____ License No _____

EMPLOYMENT INFORMATION (If employed less than two years, please give same information on prior occupation)

Present Occupation _____ Bus Phone _____
Employer or D.B.A _____ Supervisor _____
Business Address _____ From _____ To _____
Type of Business _____ Monthly Gross Income _____
Prior Occupation _____ Bus. Phone _____
Employer or D.B.A _____ Supervisor _____
Business Address _____ From _____ To _____
Type of Business _____ Monthly Gross Income _____
Other Source of Income _____ Amount _____

CREDIT REFERENCES

Bank _____ Checking _____ Savings _____ Acct. No. _____
Address _____ Phone _____
Credit Reference _____ Acct. No. _____
Address _____ Phone _____
Purpose of Credit _____ Acct Opened _____ Closed _____

Personal References

Name _____ Phone _____
Address _____ Length of Acquaintance _____
Nearest Relative _____ Phone _____
Address _____ Relationship _____

Have you ever filed bankruptcy? _____ Have you ever been evicted from any tenancy or had an eviction notice served on you? _____
Have you ever willfully and intentionally refused to pay any rent when due? _____ Have you ever been convicted of a misdemeanor or felony? _____ Are you a current illegal abuser or addict of a controlled substance? _____ Have you ever been convicted of illegal manufacture or distribution of a controlled substance? _____
If yes to any of the above, please indicate date of occurrence _____

I DECLARE THAT THE FOREGOING IS TRUE AND CORRECT, AUTHORIZE ITS VERIFICATION AND THE OBTAINING OF A CREDIT REPORT.
Permission is granted to all employers, banks, rental providers, credit providers and other agencies to provide personal information concerning wages and income, employment, rental, bill paying histories, and any other information pertinent to the granting of credit or approval of this rental application to the Owner and/or Property Manager. I agree to pay the Landlord a non-refundable screening fee of \$50.00. I understand that I am entitled to a copy of any consumer credit report obtained by the Landlord. I further agree that the Landlord may terminate any agreement entered into in reliance on any misrepresentation made above.

Applicant Signature _____ Phone _____ Date _____

Owner/Mgmnt. Co. Signature _____ Phone _____ Date _____