

Prestige Property Management, Inc.

1611 Virginia Ave. #117 P.O. Box 1511 North Bend, OR 97459

Tel. 541-751-9415 Fax 541-751-0615

prestigeproperty@frontier.com

www.prestigepm.net

Screening Guidelines

Application fees are \$50 per person 18 years old and over

The following guidelines will be followed in the processing of the application. Non-compliance of the following guidelines is grounds for immediate denial of the application. The application is subject to the agents/owner's approval. The property will remain "for rent" until an application is approved. Applications are processed in the order they are received. An application will be provided to anyone who inquires about the rental. The verification of the rental application could take up to two business days.

1. Application is to be filled out completely. If information is missing or incorrect it could delay or deny application.
2. Applicant must provide two forms of ID. One must include a photo.
3. Applications are required from each person who is over the age of 18 years who will be occupying the unit.
4. Unfavorable information provided by one applicant could be grounds for the denial of all applicants.
5. **Applicant must provide 2 years of verifiable unbiased/unrelated sources of rental history.** If you are unable to provide 2 years of rental history an exception can be made with a co-signor or an increased deposit. (To be determined by agent/owner)
6. Co-signors are required to complete and have been approved in the application process.
7. If with the information provided by the applicant, we are unable to determine prior rental history the application may be denied.
8. Actions and behaviors during the application process could be grounds for the denial of the application.

Income Requirements:

Applicant must show at least 2.5 times the amount of the rent in verifiable income. Income less than two and one-half times the amount of rent is grounds for denial of application.

Employment Requirement:

Applicants may be required to provide pay stubs as employment verification.

Applicants who are self-employed will be required to provide the previous years' tax return for proof of income.

Credit Requirements:

Consumer credit report will be obtained through a Credit Service. Negative or adverse debt is grounds for the denial of the application or may require a qualified co-signer.

Criminal Policy:

A conviction, guilty or no-contest plea for a felony in the category of offenses against persons, fraud or deception, weapons, sexual offenses, drug (including delivery, intent to sell, in possession or manufacturing) or damage to property can be grounds for denial of the application or immediate termination of the lease.

Revised 10/01/24 JG

Commercial

Home is where the heart is... ♥

Residential



OWNER/AGENT TO COMPLETE

Property Address: _____

Date received: _____ Time received: _____ a.m. p.m.

_____ # of units available (of the type and in the area) that will be available for rent in the near future by this owner.

_____ # of applications previously accepted and remaining under consideration for those units.

(If left blank, at least one unit is available and no previously accepted applications currently under consideration have been accepted.)

Examined picture identification? Yes No Type of identification? _____

RENT, DEPOSIT, AND FEE DISCLOSURE (Amounts listed below may be subject to change before the rental agreement is executed)

Monthly Rent: \$ _____ Security Deposit: \$ _____ Other Deposit: \$ _____

DEPOSITS MAY INCREASE IF APPLICANT IS UNABLE TO MEET ONE OR MORE OF OWNER/AGENT'S SCREENING CRITERIA.

If checked, Renter's Insurance is required – Tenant is required to maintain minimum of \$100,000 liability coverage and list Owner/Agent as Interested Party. If Tenant(s) combined household income falls at or below 50% of the median for the area, Renter's Insurance may not be required. Owner/Agent is also responsible to maintain their own insurance policy and may not "self insure" if Renter's Insurance is to be required. Owner/Agent must provide proof of property insurance to Tenant upon request.

Owner/Agent may charge the following:

- Late payment of rent charge of \$ 75.00
- Smoke alarm and carbon monoxide alarm tampering fee of \$250.
- Dishonored check fee of \$35 plus amount charged by bank.
- Early termination of lease fee not to exceed 1-1/2 times the monthly rent, or actual damages at the option of Owner/Agent.
- Owner/Agent may charge the following non-compliance fees after first giving a written warning notice of initial violation if noncompliance occurs within one year: \$50 fee for 2nd violation, and \$50 plus 5% of current rent for each subsequent violation. 1. Failure to clean up animal waste, garbage, rubbish or other waste. 2. Parking violation or other improper use of vehicle.
- Owner/Agent may charge a fee for keeping on the premises an unauthorized pet capable of causing damage. Fee may be assessed for repeat violations that occur as early as 48 hours after the effective date of written warning notice, and for each subsequent violation within one year of issuance of written warning. Fee not to exceed \$250 per violation.
- Owner/Agent may charge a fee for smoking/vaping in a clearly designated non-smoking/vaping unit or area of the premises. Fee may be assessed for repeat violations that occur as early as 24 hours after the effective date of a written warning notice, and for each subsequent violation within one year of issuance of written warning. Fee not to exceed \$250 per violation.

PERSONAL INFORMATION

Applicant Name: _____ Telephone: () _____ - _____
First Middle Last

Email Address: _____ Cellular Number: () _____ - _____

S.S. #: _____ Birth Date: _____ Driver's License, State and #: _____

1) Current Address: _____ City: _____ State: _____ Zip: _____
 Since: _____ Why are you moving? _____

Current Landlord: _____ Rent Amount \$ _____ Telephone: () _____ - _____

2) Previous Address: _____ City: _____ State: _____ Zip: _____
 From _____ to _____ Why did you move? _____

Previous Landlord: _____ Telephone: () _____ - _____

3) Previous Address: _____ City: _____ State: _____ Zip: _____
 From _____ to _____ Why did you move? _____

Previous Landlord: _____ Telephone: () _____ - _____

Have you ever: Been Evicted? Yes No Been sued by Landlord? Yes No Filed Bankruptcy? Yes No Been convicted, or plead guilty or no contest, to a crime? Yes No If yes to any of these, please explain: _____

If your service or companion animal requires a reasonable accommodation please inquire with Owner/Agent.

Animal #1 - Type: _____ Size: _____ Weight: _____ Ever injured anyone or damaged anything? Yes No
 Animal #2 - Type: _____ Size: _____ Weight: _____ Ever injured anyone or damaged anything? Yes No

OUTSTANDING DEBTS – Please list below all outstanding past due payment obligations and/or collections accounts.

BANK INFORMATION

1) Bank: _____ Branch: _____ Checking Account #: _____
2) Bank: _____ Branch: _____ Savings Account #: _____
3) Bank: _____ Branch: _____ Type/Account #: _____

EMPLOYMENT/INCOME

1) Current Employer: _____ How Long? _____
Supervisor: _____ Telephone: () _____ - _____
Job Title: _____ Take home pay (per month): \$ _____ Full-time Part-time
2) Previous Employer: _____ How Long? _____
Supervisor: _____ Telephone: () _____ - _____
Job Title: _____ Take home pay (per month): \$ _____ Full-time Part-time
Other Income (per month): \$ _____ Source: _____ Telephone: () _____ - _____
Other Income (per month): \$ _____ Source: _____ Telephone: () _____ - _____

REFERENCES

1) Relative: _____ Telephone: () _____ - _____
2) Emergency Contact: _____ Telephone: () _____ - _____
3) Personal Reference: _____ Telephone: () _____ - _____

PERSONAL PROPERTY

1) Automobile: Make _____ Model _____ Year _____ License # _____ State _____
2) Automobile: Make _____ Model _____ Year _____ License # _____ State _____
3) Other: Vehicles/Boats _____ Model _____ Year _____ License # _____ State _____

Do you own the following: Trampoline? Yes No Water-filled furniture? Yes No Fish Tank or Aquarium? Yes No

MEMBERS OF HOUSEHOLD

For purposes of identification only, please list names and either ages or dates of birth of other persons to occupy unit:

APPLICANT SCREENING CHARGE DISCLOSURES

- 1) Owner/Agent may obtain a credit report, or a tenant screening report which generally consists of:
 - a) Credit history including credit report;
 - b) Public records, including but not limited to judgments, liens, evictions and status of collection accounts;
 - c) Current obligations and credit ratings; and/or
 - d) Criminal records or other information verification.
- 2) Owner/Agent is requiring payment of an Applicant Screening Charge \$ 50.00 none of which is refundable unless the Owner/Agent does not screen the applicant. This application is valid for up to 60 days from date of receipt by Owner/Agent.
- 3) Any charges imposed upon Owner/Agent by a Homeowner's or Condominium Association for anyone who moves into or out of a unit within the association, may be passed through to the Tenant(s) for payment as allowed by law. Current fee is \$ _____.
- 4) If the mail receptacle associated with the dwelling unit is a locking type, Tenant(s) are solely responsible for the fees charged by the Postmaster for the re-keying of the box should a key not be provided by the Owner/Agent, or if the mail box has not been re-keyed between tenancies.

Incomplete applications will not be accepted. Inability to verify information may result in denial of application. Presentation of false information may result in denial of application or termination of tenancy if discovered within one year of submission of application.

I certify the above information is correct and complete and hereby authorize the Owner/Agent to make any inquiries the Owner/Agent feels necessary to evaluate my tenancy and credit standing (including, but not limited to credit reports). If Owner/Agent is requiring payment of an applicant screening charge, I acknowledge receiving a copy of and/or reading Owner/Agent's Screening Guidelines. I understand that I have the right to dispute the accuracy of any information provided to the Owner/Agent by a screening service or credit reporting agency.

No marijuana, medical or otherwise, may be grown, stored or consumed on the premises without the prior written consent of Owner/Agent.

Applicant _____

Date _____



Prestige Property Management, Inc.

1611 Virginia Ave. #117 P.O Box 1511 North Bend, Or 97459

Tel. 541-751-9415 Fax 541-751-0615

prestigeproperty@frontier.com

Release of Liability Authorization

I Authorize Prestige Property Management and its Agents to contact anyone necessary for the purpose of determining my credit history or tenant performance and to verify income(s).

I further release all parties from liability for providing this information even if the information they may give is negative and results in my application being rejected.

In the event that I become a resident of this rental, I authorize the Management to evaluate my performance. They also have my permission to give such evaluation if another rental property contacts them. I will hold Prestige Property Management harmless for such information, whether it is a positive or negative evaluation.

I understand that my screening fee is non-refundable if I do not qualify to rent an apartment.

Print Name(s): _____

Print Name(s): _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____