

SAGE LIVING BY DESIGN LLC RENTAL APPLICATION

PROPERTY ADDRESS: _____ Desired Move Date: _____ SCREENING FEE: \$30 per person

APPLICANT INFORMATION

FULL NAME: _____ Phone: _____
First Middle Last SS#: _____
E-mail (if regularly used): _____ Birth Date: _____

RENTAL HISTORY (2 years)

Current Address: _____
Street City State Zip
Since: _____ Rent Amt: _____ Reason for Leaving: _____
Current Landlord: _____ Phone: _____
Previous Address: _____
Street City State Zip
Dates: _____ Rent Amt: _____ Reason for Leaving: _____
Previous Landlord: _____ Phone: _____

EMPLOYMENT INFORMATION

Current Employer: _____ How Long? _____
Job Title: _____ Monthly Income: _____
Supervisor: _____ E-mail: _____ Phone: _____
Other Monthly Income: _____ Source: _____

EMERGENCY CONTACT

Name: _____ Relationship: _____
Address: _____
Phone: _____

CAR INFORMATION

Make: _____ Model: _____ License Plate #/State: _____

PET INFORMATION

Type: _____ Indoor/Outdoor: _____ How Many? _____
Weight: _____ Color: _____ Age: _____ Name: _____
Spayed/Neutered?: _____ Vaccinated?: _____

TOTAL # OF PEOPLE TO OCCUPY UNIT:

ARE THERE ANY REASONABLE ACCOMMODATIONS YOU WOULD REQUEST TO THE PROPERTY?

WHAT WEBSITE(S) DID YOU USE TO FIND THE APARTMENT? (CL, Zillow, etc)

ADDITIONAL COMMENTS:

Have you ever (if yes, please describe in comments above):

Been evicted? _____ Been sued by landlord? _____
Been convicted or pleaded guilty to a crime? _____ Filed Bankruptcy? _____

Screening Charge Disclosures: Owner/agent may obtain a tenant screening or credit report, which includes credit history, public records, information verification, current obligations and credit ratings, and criminal records. The screening fee is not refundable unless the applicant is not screened. Please see the Screening Guidelines for more details.

I certify the above information is correct and complete and give authorization to make any inquiries necessary. I understand I have the right to dispute the accuracy of any information provided by a screening service or credit reporting agency. An incomplete application may result in delay or denial. By signing below, I certify that I have read the Screening Guidelines.

Applicant _____ Date _____ Co-Applicant _____ Date _____

You may mail or drop off the application, copy of photo ID and screening fee at 575 W 27th Ave., Eugene, OR 97405.

There is a drop box onsite. Checks are payable to SAGE Living By Design. Questions, call (541) 343-3290.

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