



All applications must be fully completed prior to submitting.

Apt. Community Windmill Apartments Apt # \_\_\_\_\_

- Unreinforced Masonry Building which may be unsafe in a major earthquake  
 Add-on Roommate  Occupant (not on lease)  Additional Info Attached

Date \_\_\_\_\_ Screening Charge \$ 55 Rent \$ \_\_\_\_\_ Lease Break Fee \$ \_\_\_\_\_ Special Discount \$ \_\_\_\_\_ from \_\_\_\_\_  
 Owner/Agent Teresa Kleinberg Phone # 503-624-9856  
 Address 10587 SW Tigard St #77 City Tigard State Oregon Zip 97223

Information provided may be made available to other services or agencies for verification either during application or, if approved, during occupancy. By completing and submitting this application, applicant does not acquire any rights in any rental unit. Should applicant be approved, the applicant has three (3) days to complete the necessary paperwork and pay required monies. Include supporting documentation: Pay Stub; Letter of Recommendation; Photo Identification; Social Security Card; Etc.

**1. PERSONAL INFORMATION**

Legal Name \_\_\_\_\_  
Last First Middle  
 Other Legal Names Used: \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Active or Reserve Military?  Active  Reserve  Not Applicable  
 Driver's License # \_\_\_\_\_ State \_\_\_\_\_  
 Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_  
 License Plate # \_\_\_\_\_ State \_\_\_\_\_ Color \_\_\_\_\_  
 Home Phone \_\_\_\_\_  
 Mobile Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_

**2. INCOME DESCRIPTION**

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Employer's Phone \_\_\_\_\_ Date of Hire \_\_\_\_\_  
 Gross Income \$ \_\_\_\_\_ Frequency:  Monthly  Annually  
 Hourly Rate \$ \_\_\_\_\_ Hours per week \_\_\_\_\_  
 Position/Title \_\_\_\_\_  
 Additional Sources of Income (must attach proof and be able to verify):  
 Source \_\_\_\_\_ Amt. \$ \_\_\_\_\_ Frequency \_\_\_\_\_  
 Source \_\_\_\_\_ Amt. \$ \_\_\_\_\_ Frequency \_\_\_\_\_  
 TOTAL MONTHLY INCOME: \$ \_\_\_\_\_

**3. RESIDENCE HISTORY - CURRENT**

Applicant must provide a minimum of two (2) consecutive years of residence history. If additional space is needed attach Additional Residence History Form

Current Address \_\_\_\_\_  
Number Street Apt #  
 \_\_\_\_\_  
City State Zip  
 Own or Rent? \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
 Date of Move-In \_\_\_\_\_ Approx. Move-Out \_\_\_\_\_  
 Reason for Moving \_\_\_\_\_  
 Landlord or Mortgage Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone # (\_\_\_\_) \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_

**4. RESIDENCE HISTORY - PREVIOUS \***

Previous Address \_\_\_\_\_  
Number Street Apt #  
 \_\_\_\_\_  
City State Zip  
 Own or Rent? \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
 Date of Move-In \_\_\_\_\_ Approx. Move-Out \_\_\_\_\_  
 Reason for Moving \_\_\_\_\_  
 Landlord or Mortgage Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone # (\_\_\_\_) \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_

**5. OTHER IMPORTANT INFORMATION**

List all persons in unit: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Head of Household: \_\_\_\_\_  
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_   
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_   
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_   
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_   
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_   
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_   
 Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Disclosed Disability and/or Mobility Need(s)  Yes  No  
 Do you have a pet or other animal?..... Type? \_\_\_\_\_  Yes  No  
 Do you have a water bed or use an aquarium? .....  Yes  No  
 Do you intend to use a musical instrument? .....  Yes  No

**Applicant Disclosure. Have you:**  
 Been evicted? .....  Yes  No  
 Been convicted of a felony? .....  Yes  No  
 Been convicted of a misdemeanor? .....  Yes  No  
 Year: \_\_\_\_\_ State: \_\_\_\_\_ Status: Convicted / Dismissed / Open  
 Explain nature of conviction(s) \_\_\_\_\_

**6. CERTIFICATION OF ACCURACY & APPLICANT SIGNATURE**

Applicant hereby certifies that the information contained on this fully completed application and all additional information submitted, is true and correct, and hereby authorizes landlord/agent to make any necessary inquiries deemed necessary to evaluate the application for tenancy and credit standing. Applicant understands and accepts that any information provided that is incomplete, inaccurate, or falsified shall be grounds for denial of the application or subsequent termination of tenancy upon determination of such material misrepresentation.

APPLICANT SIGNATURE \_\_\_\_\_  
 Submission Date \_\_\_\_\_ Time \_\_\_\_\_ am/pm  
 Visual proof of photo ID reviewed. ....  Yes  No  
 Approved As Is  Approved with Condition  Denied