# Western View Properties

# Property Management Applicant Screening Criteria

- 1. **Application Fee:** \$60 fee per person 18 years of age or over that will live in the unit. This fee is non-refundable and applications will not be processed without the fee.
- 2. Application process: Applicant is encouraged to review the screening criteria to determine if requirements can be met.

  Each prospective occupant 18 years of age or older is required to provide a completed application and app fee. Acceptance or denial of the application may take up to 7 business days. Upon acceptance, applicant is required to pay the security deposit within three business day.
- 3. Payments: Rent and security deposits need to be made in separate payments. Only payments accepted are money order, check, or card. No cash is accepted for rent or security deposits (exact cash can be used for applications).
- 4. **Identification:** Applicant shall provide picture ID at the time of submitting application. If management is unable to screen the applicant or applicant is without verifiable rental history an additional security deposit may be required.
- 5. Rent to Income Ratio/Source of Income: Combined amount of all income shall be three times the amount of rent. All sources of employment, unemployment, financial aid, assistance, and parent contributions shall be legally obtained and verifiable. At the time of application it shall be the obligation of the applicant to provide proof of income through tax returns, investment reports, pay stubs, employment verification, award letters, or other financial data. In some situations a Parent Responsibility Letter will suffice. Stability of the source and amount of income during the past five years may be considered.
- 6. **Income to Debt Ratio:** Housing and utilities shall not exceed 35% of total income. Installment debt payments shall not exceed 35% of total income. If the applicant does not have installment debts, income to debt ratio of housing may be permitted to be up to 50% of income.
- 7. Housing References: The applicant shall provide information necessary to verify current and previous rental history for the past five years. Information obtained from those related by blood or married may require compliance with the Variance Policy. If the applicant's housing during the past five years has included home ownership, mortgage payment history shall be considered.
- 8. Credit Worthiness: Credit worthiness shall be determined from a credit report, which should reflect prudent payment history. Parent Responsibility Letters for college students will be used for credit worthiness. Applicant's history should be free from evictions, judgments, collections, and bankruptcies. A valid explanation may be considered by the owner/agent if provided by the applicant.
- 9. **Arrests and convictions:** An applicant with previous arrests and/or convictions will be evaluated to determine if an individual occupancy could constitute a direct threat to the health and or safety of other individuals or could result in physical damage to premises.
- 10. Limitations: Occupancy shall not exceed two people per bedroom. Smoking is not permitted in the unit. Parking shall be limited to one vehicle per unit. Pets may or may not be permitted, dependent on the owner/agent. The owner/agent shall allow aid animals or modifications to the unit necessary to assist those with disabilities with the submission of a completed Reasonable Accommodation form signed by an accredited medical professional.
- 11. **Demeanor and Behavior:** The behavior and demeanor of applicants and those with the applicant during the application process will be considered.
- 12. **Incomplete, Inaccurate, or Falsified Information:** Any information that is incomplete, illegible, inaccurate, or falsified shall be grounds for rejection or termination of rental agreement upon discovery.
- 13. If tenant(s) should withdraw from the rental agreement, the security deposit will not be refunded.
- 14. Variance policy: Failure to meet the screening criteria shall be grounds for:
  - a. Denial of application and/or
  - b. Asked to submit to an interview and/or
  - c. Requirement of a cosigner who shall also be required to meet the screening criteria and/or payment of an additional deposit.

# WESTERN VIEW Properties

PROPERTY MANAGEMENT, LLC

### Applicant Screening Criteria

Applicant Name:

Current Address:

Applicants(s) are urged to review the screening criteria to determine if the requirements can be met. If any applicant needs assistance in the application process, please advise the landlord. Non-English speaking applicants may provide an interpreter to assist. A valid explanation for any difference from the requirements may be considered by the landlord if provided by the applicant(s). If necessary, provide additional information or explanations on a separate sheet of paper. Failure to meet the screening criteria may be grounds for: (1) The denial of the application, or (2) The requirement of a co-signer and/or (3) The requirement of payment of an additional deposit. Incomplete, inaccurate, illegible or falsified information may be grounds for rejection or termination of the rental agreement upon discovery.

#### 1. Application process:

- Each applicant 18 yrs and older shall submit a completed application that is legible, verifiable and accurate.
- Each applicant shall provide photo identification.
- An applicant screening charge of \$60.00 per applicant shall be paid before application will be processed. This charge is nonrefundable.
- The landlord utilizes a professional tenant background screening service to obtain credit reports to verify financial information and reports of civil and criminal records to verify information.

If the application is denied in whole or in part on information received from a tenant screening service or a consumer credit reporting agency, the applicant shall be notified, in writing, of that fact at the time of the denial. The name and address of the agency will be provided to allow the applicant to obtain a copy of the reports and correct any incorrect information.

#### 2. Limitations:

- Occupancy may not exceed two persons per bedroom.
- Vehicle parking is limited to one vehicle per unit based on available parking spaces.
- All rental units are non-smoking units.
- Pets are not allowed without landlord/owner approval.

Aid animals necessary to assist those with disabilities will be allowed with a completed Reasonable Accommodation form from an accredited medical professional.

- 3. Arrests and Convictions: Arrests and/or convictions of civil and criminal activity may be evaluated. Any individual whose occupancy could constitute a direct threat to the health or safety of other individuals or could result in physical damage to the premises will be denied.
- 4. Fees: Rent is due the 1<sup>st</sup> of each month late after the 5<sup>th</sup> if not paid on time a late fee of \$100 will be applied to the account. Smoke alarm/Carbon Monoxide alarm tampering fee \$250. Return check charge of \$65 will be applied also.

Applicant signature:	Date:
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P.O. Box12398 = Salem, OR 97309 503.375.0451 = Toll Free 1.888.375.0451 Fax 503.364.0195 = Toll Free Fax 1.877.450.2774 www.advrep.com

Professional Background Screening Services

#### YOUR TENANT SCREENING REPORT AUTHORIZATION

I understand that Advanced Reporting will be preparing my Tenant Screening report and I authorize them to obtain consumer credit/criminal history information on me. I authorize my creditors and employers to release to Advanced Reporting all information necessary to complete said report. I further understand that use of a photocopy of this form may be necessary to verify one or more of my credit references. I authorize that use, and request of such a copy be honored fully. This consent is subject to written revocation at anytime except to the extent that action has been taken in reliance there on. In any event, this consent shall expire upon the conclusion of said report.

Date:			
Applicant Name:	Social Security #:	 	
All other names used:	Date of Birth:	 	
Applicant Signature:			



### PARENT RESPONSIBILITY LETTER

DATE:	_
APPLICANT:	
I/We,	
,	aid rent and utilities that may occur during tenancy
with Western View Properties Propert	y Management, LLC. I/We will also be
responsible for any and all damage cha	arges and/or excessive cleaning charges that may
be charged to restore the unit to rentab	ole condition.
PRINT NAME(S):	
ADDRESS:	
HOME #:	Date of Birth:
OFFICE#:	
CELL #:	
DADENIT CICNATUDE.	
PARENT SIGNATURE:	
PARENT SIGNATURE:	· · · · · · · · · · · · · · · · · · ·

#### PERSONAL INFORMATION Telephone: ( ) - Mobile: ( Applicant Name: S.S.#: Birth Date: Email Address: Driver's License, State and #: 1) Current Address: Unit: State: Zip: Rent Amount \$ City: Since: Why are you moving? Telephone: ( ) -Current Landlord: 2) Previous Address: Rent Amount \$ City: State: Zip: to Why did you move? From Telephone: ( ) -Previous Landlord: Unit: 3) Previous Address: State: Zip: Rent Amount \$ City: From to Why did you move? Telephone: ( Previous Landlord: EMPLOYMENT/INCOME 1) Current Employer:\_\_\_\_\_ How Long? Telephone: ( Supervisor: 2) Previous Employer: \_\_\_\_\_ How Long? Telephone: ( Supervisor: \_\_\_\_\_ Take home pay (per month): \$ \_\_\_\_\_ Job Title: Other Income (per month): \$ \_\_\_\_\_ Source: \_\_\_\_\_ Telephone: ( Other Income (per month): \$ \_\_\_\_\_ Source: \_\_\_\_\_ 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? The Yes No If yes to any of these, please explain: PERSONAL PROPERTY 1) Automobile: Make \_\_\_\_\_ Model \_\_\_\_ Year \_\_\_ License # \_\_\_\_ State \_\_ Automobile: Make \_\_\_\_\_ Model \_\_\_\_ Year \_\_\_ License # \_\_\_\_ State \_\_\_\_ 3) Other: Vehicles/Boats \_\_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_ Do you own the following: Trampoline? The Same of Same Please list all household animals. Animal #1 - Type: \_\_\_\_\_\_ Size: \_\_\_\_\_ Weight: \_\_\_\_\_ Ever injured anyone or damaged anything? \( \subseteq \text{Yes} \subseteq \text{No} \) Animal #2 - Type: \_\_\_\_\_\_ Size: \_\_\_\_\_ Weight: \_\_\_\_\_ Ever injured anyone or damaged anything? Types No BANK INFORMATION Bank: \_\_\_\_\_ Branch: \_\_\_\_ Checking Account #: \_\_\_\_\_ 1) 2) 3) **OUTSTANDING DEBTS** – Please list below all outstanding past due payment obligations and/or collections accounts. MEMBERS OF HOUSEHOLD For purposes of identification only, please list names and either ages or dates of birth of other persons to occupy unit: REFERENCES Telephone: ( 1) Relative: Telephone: ( 2) Emergency Contact: Telephone: ( Personal Reference:

Page 3 of 4





## INFORMATION RELEASE CONSENT

INFORMATION REQUESTED BY:	
Owner/Agent/Company: 1005tern View ?	PAPERTIES Contact:
	P.O. Box #_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
City: Monworth	State: 02 Zip: 97361
Telephone: (503) 838-1218 Email Address: Wes	State: 02 Zip: 97361
INFORMATION REQUESTED FOR:	
Applicant Name:	Telephone:()
Email Address:	Mobile Number:()
the Owner/Agent feels necessary to evaluate my tenant reports). If Owner/Agent is requiring payment of an App and/or reading Owner/Agent's Application Screening Gu I understand that I have the right to dispute the accuracy of	f any information provided to the Owner/Agent by a screening previous employer, personal reference nor other third party
INFORMATION PROVIDED BY:	
Company (if applicable):	,
Name:	Title:
Telephone:( Email Address:	
Signature:	Date:







### APPLICANT SCREENING CHARGE RECEIPT

**S3** 

Name(s):Rental Address:		Timit.
Applicant Mailing Address:		Onit:
Sity:	State:	Zip:
AMOUNT OF CHARGE: \$		
"Applicant Screening Charge"	means any nonrefundable pay	ment of money charged
by an Owner/Agent of a prospec	ctive Tenant prior to entering in	nto a Rental Agreement.
The purpose of this payment is		
1 1	Process unitapparential to a	remain office
		× *
		o .
I acknowledge the receipt of an Ap	onlicant Screening Charge	
r dekalowiedge the receipt of an Ap	pheam screening Charge.	
Owner/Agent Signature:		Date:
		Date
Owner/Agent:		
ity.	State:	Zip:
Telephone:	Email:	



