

Received on \_\_\_\_\_ (date)  
by \_\_\_\_\_ (initials)

APPLICATION # \_\_\_\_\_



# ASSOCIATED ISLAND BROKERS

## Residential Lease Application

Each applicant and co-applicant 18 years or older must submit an application

**Property Address:** \_\_\_\_\_

Anticipated Move in Date \_\_\_\_\_ Monthly Rent Amount \_\_\_\_\_

### APPLICANT INFORMATION

**Applicant's Name (First, Middle, Last)** \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Drivers License Number \_\_\_\_\_ State Issued \_\_\_\_\_

**Co-Applicant's Name (First, Middle, Last)** \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Drivers License Number \_\_\_\_\_ State Issued \_\_\_\_\_

**Name all other persons who will occupy the Property:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

**Applicant's current address:** \_\_\_\_\_

Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_

Date moved-in \_\_\_\_\_ Move out date \_\_\_\_\_ Rent \$ \_\_\_\_\_

Reason for move \_\_\_\_\_

**Applicant's previous address:** \_\_\_\_\_

Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_

Date moved-in \_\_\_\_\_ Move out date \_\_\_\_\_ Rent \$ \_\_\_\_\_

Reason for move \_\_\_\_\_

### VEHICLE(S)

List all vehicles to be parked on the Property

Make/Model/Type \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Plate# \_\_\_\_\_

Make/Model/Type \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Plate# \_\_\_\_\_

### EMPLOYMENT

**Applicant's Current Employer:** \_\_\_\_\_

Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Employed: from \_\_\_\_\_ to \_\_\_\_\_ Gross Monthly Salary \_\_\_\_\_

Position \_\_\_\_\_ Email: \_\_\_\_\_

**Co-Applicant's Employer:** \_\_\_\_\_

Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Employed: from \_\_\_\_\_ to \_\_\_\_\_ Gross Monthly Salary \_\_\_\_\_

Position \_\_\_\_\_ Email: \_\_\_\_\_

**ADDITIONAL Employer, if applicable** \_\_\_\_\_

Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Employed: from \_\_\_\_\_ to \_\_\_\_\_ Gross Monthly Salary \_\_\_\_\_

Position \_\_\_\_\_ Email: \_\_\_\_\_

**PETS**

*List all pets to be kept on the property (dogs, cats, birds, reptiles, fish, and other pets)*

Type & Breed \_\_\_\_\_ Type & Breed \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Color \_\_\_\_\_ Weight \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_

Age \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Neutered?  Yes  No Declawed?  Yes  No Neutered?  Yes  No Declawed?  Yes  No

Shots Current?  Yes  No Shots Current?  Yes  No

**EMERGENCY INFORMATION**

In case of personal emergency, notify \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**REFERENCES**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

**OTHER INFORMATION**

Does anyone who will occupy the Property smoke?  Yes  No

Is anyone who will occupy the Property in the Military?  Yes  No

**HAS APPLICANT EVER:**

Been evicted?  Yes  No

Been asked to move out by a landlord?  Yes  No

Breached a lease or rental agreement?  Yes  No

Filed for bankruptcy?  Yes  No

Lost property in a foreclosure?  Yes  No

Had any credit problems?  Yes  No

Been convicted of a crime?  Yes  No

Is any occupant a registered sex offender?  Yes  No

Are there any criminal matters pending against any occupant?  Yes  No

Is there additional information applicants want considered?  Yes  No

## AUTHORIZATION & REPRESENTATION

*Please leave a copy of your Driver's License or other picture identification. All information must be complete. Failure to provide complete information, including names, addresses, and phone numbers will delay the processing of this application. Applications are held in the office no more than 6 months.*

Applicant authorizes any agent of Associated Island Brokers, Inc, or Landlord and landlord's agent, at any time before, during or after any tenancy, to: (1) obtain a copy of Applicants credit report; (2) obtain a criminal background check related to Applicant and any occupant; and (3) verify any rental, employment, or criminal history or verify any other information related to this application with persons knowledgeable of such information. Applicant represent that the statements in this application are true and complete. Applicant understands that providing false or inaccurate is grounds for rejection and a breach of any lease.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant's Signature

\_\_\_\_\_  
Date

### ASSOCIATED ISLAND BROKERS

202 Center Street, Suite 101

Kodiak, AK 99615

Office: (907) 486-2000

Fax: (907) 486-4016

Email: [aibi@ptialaska.net](mailto:aibi@ptialaska.net)

## RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of Applicants for rental housing. The information provided by the current or former Owner/Agent may be used solely for the purpose of evaluating the application for rental housing.
- The Owner/Agent requesting this information must receive authorization from the applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 2. Copies of this form and of the Applicant's signature are acceptable.
- The Applicant may be contacted to verify the authenticity of this request.

### 1. Person Requesting the rental reference

**ASSOCIATED ISLAND BROKERS, INC.**

202 Center Avenue, Ste. 101

Kodiak, AK 99615

Phone: (907) 486-2000 Fax: (907) 486-4016 Email: aibi@ptialaska.net

### 2. Authorization by rental applicant for the release of information

I hereby authorize the release of the information requested on this Rental Applicant Reference Request to the Owner/Agent listed above. I hereby acknowledge that the Owner/Agent can make copies of this executed page in order to obtain the information requested.

Name \_\_\_\_\_ Phone number (\_\_\_\_\_) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### 3. Applicant's rental information

Name of Rental \_\_\_\_\_

Address of rental unit \_\_\_\_\_

Name of Owner/Agent \_\_\_\_\_

Move-in date: \_\_\_\_\_ Move-out date: \_\_\_\_\_

### 4. Rental reference information

Did Applicant live at your property during the period indicated above?.....  Yes  No

If no, what were the dates of occupancy? \_\_\_\_\_

How many times during the lease did Applicant pay the rent late?.....  0  1-2  3-5  6 or more

Was any check from Applicant returned due to non-sufficient funds (NSF)?.....  Yes  No

Did you ever file for unlawful detainer against Applicant for unpaid rent?.....  Yes  No

If yes, what was the result? \_\_\_\_\_

Does Applicant owe any amount for delinquent rent, utilities or damage to unit?.....  Yes  No

Did Applicant provide notice for ending tenancy according to the terms of the rental agreement?.....  Yes  No

Information provided by: Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Please mail, email or fax this form to Associated Island Brokers, Inc. (within 24-48 hours)