APPLICATION FOR RENTAL OF APARTMENT/HOME/SPACE

Wright Services, Inc.
5454 Shaune Drive
Juneau, Alaska 99801-9539
(907) 780-5454
Fax (907) 780-5459

Apt. Building & No._____
Park & Space No._____
Rental Rate _____ Security Deposit_____
❑ Subtenant ❑ Lease ❑ Month-to-month

YOUR APPLICATION MUST BE SUBMITTED TO OUR OFFICE ALONG WITH A COPY OF YOUR DRIVER'S LICENSE OR OTHER GOVERNMENT ISSUED PHOTO IDENTIFICATION. YOU MUST FURNISH THE ACTUAL ID DOCUMENT TO US FOR VERIFICATION PRIOR TO EXECUTING A RENTAL AGREEMENT.

First Name _____ Middle Name _____ Last Name _____

Current Street Address _____ Home Phone _____ Work Phone_____

PO Box or Mailing Address_____ Email Address _____Cell Phone _____

Date of Birth _____/_____/_____ Social Security # _____ Driver's License # _____ State _____

EMPLOYMENT HISTORY – INCLUDE ALL EMPLOYMENT FOR PAST 3 YEARS, MOST RECENT JOB FIRST

Employer	Phone	Job Title	From	To	Full/Part Time	Monthly Gross
			___/___/___	___/___/___	❑F❑P	
			___/___/___	___/___/___	❑F❑P	
			___/___/___	___/___/___	❑F❑P	

CONTINUE ADDITIONAL EMPLOYMENT HISTORY ON BACK PAGE

RESIDENCE HISTORY

List your physical addresses for the last three (3) years, most recent address first, beginning with your current address. If you owned your own home instead of renting, please give name of lender, mortgage account number, and phone number for lender.

Landlord's Name	Daytime phone # or message phone #:	Address:	From:	To:	Amount of Rent:
			___/___/___	___/___/___	
			___/___/___	___/___/___	
			___/___/___	___/___/___	

CONTINUE ADDITIONAL RESIDENCE HISTORY ON BACK PAGE

Other sources of income you want us to consider_____Monthly amount $_____

Has an eviction action ever been filed against you? ❑YES ❑NO Has a small claims action ever been filed against you? ❑YES ❑NO Have you been charged damage charges or do you owe unpaid rent to any landlord in the past 3 years? ❑YES ❑NO Have you been convicted of a felony? ❑YES ❑NO Have you been convicted of a misdemeanor within the past five years? ❑YES ❑NO

If you answer YES to any of these questions, please explain on back

Co-applicant's name, if applicable (Co-applicant must submit a separate application) _____

Names of all proposed occupants under 18_____

Vehicle Make/Year _____ Model _____ Color _____ License # _____

Vehicle Make/Year _____ Model _____ Color _____ License # _____

Does anyone in the household smoke? ❑ YES ❑ NO

Do you have a pet? ❑ YES ❑ NO If yes, what? _____ Age_____ Lbs._____ Date of last shot ____/____/____ ❑Male❑Female ❑Indoor❑Outdoor ❑Spayed/Neutered

Second pet? ❑ YES ❑ NO If yes, what? _____ Age_____ Lbs._____ Date of last shot ____/____/____ ❑Male❑Female ❑Indoor❑Outdoor ❑Spayed/Neutered

Contact person in case of emergency _____ Phone #_____ Relationship_____

I DECLARE THAT THE STATEMENTS ON THIS APPLICATION ARE TRUE, CORRECT AND COMPLETE, AND HEREBY AUTHORIZE VERFICATION OF REFERENCES GIVEN. I hereby authorize any institution to release credit information concerning myself to Wright Services, Inc. This authorization is given to enable Wright Services to promptly and fairly evaluate my request for credit. In order to facilitate future requests for credit from other creditors, I further authorize Wright Services, Inc. to disclose factual information regarding records of my payments and charges.

Signed _____ Date _____

Applications cannot be processed unless all information is complete and you submit your photo ID for verification. We perform court record and sex offender checks on all applicants. If you have resided in a state that charges for such checks, you will have to pay the record check fee(s) before we can consider your application.

Office use only RECEIVED:_____ ❑ CT CI ❑ FED _____ ❑CT CR ❑ SO OK ❑ID OK

ADDITIONAL WORK HISTORY continued from front

Employer	Phone	Job Title	From	To	Full/Part Time Monthly Gross
_____	_____	_____	___/___/___	___/___/___	❑F❑P _____
_____	_____	_____	___/___/___	___/___/___	❑F❑P _____
_____	_____	_____	___/___/___	___/___/___	❑F❑P _____
_____	_____	_____	___/___/___	___/___/___	❑F❑P _____
_____	_____	_____	___/___/___	___/___/___	❑F❑P _____

ADDITIONAL RESIDENCE HISTORY continued from front

Landlord's Name	Daytime phone # or message phone #:	Address:	From:	To:	Amount of Rent:
_____	_____	_____	___/___/___	___/___/___	_____
_____	_____	_____	___/___/___	___/___/___	_____
_____	_____	_____	___/___/___	___/___/___	_____
_____	_____	_____	___/___/___	___/___/___	_____
_____	_____	_____	___/___/___	___/___/___	_____

WE REQUIRE THAT APPLICANTS HAVE A GROSS MONTHLY INCOME EQUAL TO 2 ½ to 4 TIMES THE MONTHLY RENT, DEPENDING ON WORK & RENTAL HISTORY. IF YOU HAVE NO PREVIOUS RENTAL HISTORY, INADEQUATE INCOME, OR HAVE BEEN CHARGED FOR UNPAID RENT OR DAMAGE CHARGES BY ANY LANDLORD IN THE PAST 3 YEARS, YOU MAY BE ASSESSED A HIGHER SECURITY DEPOSIT OR BE REQUIRED TO HAVE A CO-SIGNER OR GUARANTOR IN ORDER TO BE APPROVED AS A TENANT. CO-SIGNERS OR GUARANTORS MUST SUBMIT A SEPARATE APPLICATION.

Explanation of eviction action, small claims action, damage charges, unpaid rent, or criminal history:

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Any other information you would like us to consider:

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_____

***** PRINT any other names you have worked under, or have been known as, including maiden name:

_____

_____

_____

Signed _____ Date: _____