

# Cougar Crest Apartments

2055 NE Skyview Dr.  
Pullman, Washington 99163  
(509) 334-6028  
(509) 334-6218 Fax

## IDENTIFICATION

Applicant's Name \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ S.S.N.# \_\_\_\_\_

Driver's Lisc./ID# \_\_\_\_\_ Driver's Lisc. ID#/Address \_\_\_\_\_

Additional Names Used \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Permanent/Parent's Address \_\_\_\_\_ Phone# \_\_\_\_\_

## RESIDENTIAL HISTORY

Address \_\_\_\_\_ Apt# \_\_\_\_\_ Address \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Apt. Community \_\_\_\_\_ Apt. Community \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

\_\_\_Rent\_\_\_ Own Dates (mo/yr) From \_\_\_\_\_ to \_\_\_\_\_ \_\_\_Rent\_\_\_ Own Dates (mo/yr) From \_\_\_\_\_ to \_\_\_\_\_

Owner/Mgr. Name \_\_\_\_\_ Amt. \$ \_\_\_\_\_ Owner/Mgr. Name \_\_\_\_\_ Amt. \$ \_\_\_\_\_

Reason For Move \_\_\_\_\_ Reason For Move \_\_\_\_\_

## REFERENCES

Local Acquaintance \_\_\_\_\_ Phone \_\_\_\_\_ Address \_\_\_\_\_

Nearest Relative \_\_\_\_\_ Phone \_\_\_\_\_ Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Address \_\_\_\_\_

HAVE YOU EVER BEEN EVICTED? Yes\_\_ No\_\_ If yes, property name, address, and phone:

Broken a rental contract? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes explain \_\_\_\_\_

Refused to pay rent? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes explain \_\_\_\_\_

Do you own a: Waterbed \_\_\_\_\_ Aquarium \_\_\_\_\_ Cat \_\_\_\_\_ Describe any Other pets \_\_\_\_\_

I understand that I acquire no rights to the rental until the rental contract is signed. Applicant represents that all of the above statements are true and complete and authorizes the release of information with regard to residency, public records, and references to Cougar Crest Apartments. Applicant further authorizes the disclosure of the information to owner/agent and acknowledges that false or misrepresented information may constitute grounds for rejection of this application. Applicant agrees that this is a routine investigation of character, general reputation, and mode of living and shall not constitute an invasion of privacy. I have read and agreed to the provisions above. To the best of my knowledge all answers are true and correct. I understand that misleading or false information may result in denial of tenancy or possible eviction.

Initial \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_