

Lowry Rentals Application

Note: **Use dark pen, print clearly.** Be thorough--the more information the better. Use "Other comments" section if more space is needed. Per RCW 59.18.257, State of Washington--<https://dw.courts.wa.gov/>--and Pierce County LINX records may be reviewed and impact decision to accept or reject this application, as well as reports from housing, employer and personal references.

Address of this rental _____

Applicant 1 _____ / _____ / _____ (____) _____ - _____
(First) (Middle) (Last) Birth date Current Phone

Driver's License Number # Expiration Date

Email _____

Applicant 2 _____ / _____ / _____ (____) _____ - _____
(First) (Middle) (Last) Birth date Current Phone

Driver's License Number # Expiration Date

Names, ages & relationships of others to occupy rental unit

Rental history (Start with most recent. Specify which applicant--#1, #2, B = both)

1/2/B	Address	Manager	Dates rented
1.	_____	_____	From _____ _____ Ph. # _____ To _____
2.	_____	_____	From _____ _____ Ph. # _____ To _____
3.	_____	_____	From _____ _____ Ph. # _____ To _____
4.	_____	_____	From _____ _____ Ph. # _____ To _____

Applicant 1
Cur. employer _____ Position _____
Address _____ Supervisor _____ Ph. _____
Dates employed _____ to _____ Hrs./wk. _____ Salary _____
Prev. employer _____ Position _____
Address _____ Supervisor _____ Ph. _____
Dates employed _____ to _____ Hrs./wk. _____ Salary _____

(Continue on next page)

Applicant 2

Cur. employer _____ Position _____

Address _____ Supervisor _____ Ph. _____

Dates employed _____ to _____ Hrs./wk. _____ Salary _____

Prev. employer _____ Position _____

Address _____ Supervisor _____ Ph. _____

Dates employed _____ to _____ Hrs./wk. _____ Salary _____

Prev. employer _____ Position _____

Address _____ Supervisor _____ Ph. _____

Dates employed _____ to _____ Hrs./wk. _____ Salary _____

Both Applicants

Other income (Ave./month) _____

Source _____

Financial obligations/problems (explain) _____

Have you been: Arrested? ____ Bankrupt? ____ Evicted? ____ Court Judgment? ____

If yes on any, explain _____

Notify in emergency _____ Ph. _____

Relationship _____ Address _____

Personal reference _____ Ph. _____

Personal reference _____ Ph. _____

What pets, if any, will you have? (Inside/outside/both?) _____

Do you smoke? _____ Will you agree to not smoke anywhere on the property? _____

Why are you moving at this time? _____

When do you want to move in? _____

How long do you expect to live here? _____

Other comments _____

Completed application can be scanned & attached to an email to john@lowryrentals.com

Or mailed to P. O. Box 1648, Milton, WA. 98354. Tel. 253-841-4948.

We authorize John Lowry, owner, Lowry Rentals, to verify the above information.

Applicant 1 signature _____ Date _____

Applicant 2 signature _____ Date _____