

Prospective Tenants/Renters: Your completed rental application must be submitted to the landlord or their property manager. Do NOT submit applications to the Washington Landlord Association (WLA). WLA does NOT accept applications from prospective tenants/renters.

LANDLORD INFORMATION:

Select WLA Office Location:

- ☐ EVERETT (If yes, landlord fax application to 425-353-7132 or email to everett@walandlord.com) - Phone: 425-353-6929
- ☒ OLYMPIA (If yes, landlord fax application to 360-252-6803 or email to olympiaoffice@walandlord.com) - Phone: 360-350-0753
- ☐ TACOMA (If yes, landlord fax application to 253-944-9070 or email to tacoma@walandlord.com - Phone: 564-220-0246

Landlord Name: Capiolt Property Management		Results: <input checked="" type="checkbox"/> Email <input type="checkbox"/> FAX <input type="checkbox"/> Walk-In		LANDLORD ONLY: Non Refundable Fee: \$ _____ Rent \$ _____ Lease: 6mo <input type="checkbox"/> 1yr <input type="checkbox"/> Month to Month: <input type="checkbox"/> Deposit \$ _____
Landlord Phone 360-209-4103		Fax: _____ Email: _____		
Rental Address: _____				
Decision Point Plus/Nationwide Criminal <input type="checkbox"/>		Decision Point Plus <input checked="" type="checkbox"/>		
Basic Credit <input type="checkbox"/>		Nationwide Criminal <input type="checkbox"/>		
Tenant Performance <input type="checkbox"/>		Landlord Verification <input type="checkbox"/> Employment Verification <input checked="" type="checkbox"/>		
Social Security Search <input type="checkbox"/>		Notes: Email: contact@capitol-pm.com		

WLA DOES NOT ACCEPT APPLICATIONS FROM PROSPECTIVE TENANTS. APPLICATIONS MUST BE SUBMITTED TO THE LANDLORD ALONG WITH THE APPLICATION FEE.

APPLICANT INFORMATION

Please provide landlord with proof of income and valid photo ID.

FIRST/MIDDLE/LAST NAME (Verify ID):		OTHER LAST NAME(S) USED:		BIRTHDATE:		SS #	
DRIVERS LICENSE OR ID#		DATE ISSUED/STATE		EXPIRATION DATE		AREA CODE+PHONE:	
CURRENT ADDRESS		UNIT#		CITY		STATE ZIP	
DO YOU? <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> LIVE W/PARENT <input type="checkbox"/> OTHER:				DO YOU SMOKE? <input type="checkbox"/> YES / NO <input type="checkbox"/>			
CURRENT LANDLORD or MORTGAGE CO.				CITY		STATE AREA CODE + PHONE	
REASON FOR MOVING		MONTHLY PAYMENT \$		HOW LONG AT CURRENT ADDRESS?			
PREVIOUS ADDRESS		UNIT#		CITY		STATE ZIP	
DID YOU? <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> LIVE W/PARENT <input type="checkbox"/> OTHER:							
PREVIOUS LANDLORD/MORTGAGE CO.				CITY		STATE AREA CODE + PHONE	
REASON FOR MOVING		MONTHLY PAYMENT \$		HOW LONG AT THIS ADDRESS?			
EMPLOYER/INCOME SOURCE		ADDRESS		CITY		STATE MONTHLY GROSS INCOME:	
POSITION		SUPERVISOR'S NAME		AREA CODE +PHONE		EMPLOYMENT DATES PART TIME <input type="checkbox"/> FULL TIME <input type="checkbox"/>	
EMERGENCY CONTACT		RELATIONSHIP		ADDRESS		CITY ST ZIP AREA CODE+PHONE	
CAR MAKE/YEAR/MODEL				PLATE:		COLOR:	
REFERENCES		AREA CODE+PHONE		RV/BOAT/AQUARIUM/WATERBED/PIANO/LARGE ITEMS?			
HAVE YOU EVER BEEN CHARGED OR CONVICTED OF A CRIMINAL OFFENSE OR FELONY? <input type="checkbox"/> YES / NO <input type="checkbox"/> DETAILS:							
HAVE YOU EVER BEEN EVICTED OR LEFT A RENTAL OW ING A LANDLORD MONEY? <input type="checkbox"/> YES / NO <input type="checkbox"/> DETAILS:							
EVER FILED FOR BANKRUPTCY?: WHEN?							
DO YOU HAVE PETS OR ANIMALS?: <input type="checkbox"/> YES / NO <input type="checkbox"/> IF YES, TYPE & BREED?							
PROPOSED OCCUPANTS: ANYONE OVER 18 COMPLETE SEPARATE APPLICATION							
NAME		DOB		RELATIONSHIP		NAME DOB RELATIONSHIP	

In compliance with the Fair Credit Reporting Act, State & Federal laws, this is to inform you that an investigation involving the statements made on this application for tenancy is being initiated. I certify that to the best of my knowledge, all statements are True & Complete. I further authorize the above Landlord and *WLA to obtain credit reports, court records, character reports, employment and rental history as needed to verify all information put forth in this application.

APPLICANT SIGNATURE

DATE:

* WLA and Reporting Agencies make no decision or suggestion on the acceptance/denial of applicant(s). Rev 5/25

WLA OFFICE ONLY: DATE PROCESSED _____ BY WHOM _____ PAID: YES - NO PAYMENT: INV - CC - C - CK CHECK # _____	
WHICH REPORTS: _____ COST: _____	

APPLICANT SCREENING AUTHORIZATION FORM

(Please print clearly)

Please remember to have your applicant(s) **print neatly** to reduce mistakes and typos.

All fields (except previous address) are **REQUIRED!** Reports will not be run unless filled out completely.

ONE FORM PER PERSON, PLEASE, OR IT WILL BE REJECTED

Applicant Full Name: _____
(First, middle, last)

Social Security Number: _____ Date of Birth: _____

Combined monthly income of all applying: _____ # of months at current position: _____

Current Address: _____ Since: ____/____/____
(Street, city, state, zip)

Previous Address: _____ Since: ____/____/____
(Street, city, state, zip)

I certify that the above information is correct and complete and hereby authorize you to make inquiries you feel necessary to evaluate my tenancy and credit standing, including but not limited to, a check of my credit. I understand that if I am denied tenancy due to my credit standing, I have the right to dispute the accuracy or completeness of any information in the credit report.

Applicant Signature: _____

RENTAL OWNER/LANDLORD ONLY

Monthly Rent for Unit (required): _____

Landlord Name (First & Last Name): _____ Company Name: _____

Property Located in (City): _____ SUBMITTED BY: _____

Phone Number: _____ Fax Number: _____ Email: _____

Reports must be kept in the strictest confidence. If you choose to deny this applicant, the applicant may request a copy of the reports and has a right to receive them. By signing below I agree to only screen applicants for the purposes of residential tenancy. I will not e-mail this form or any other personal, financial or confidential information.

Membership Signature: _____

Tenant Screening Reports:

☐ Decision Point Plus/Nationwide Criminal

☒ Decision Point Plus

☐ Basic Credit Report

☐ Tenant Performance Profile - Includes
Eviction History

☐ Nationwide Criminal Report (all of the U.S.)

☒ Employment Verification - 2-5 days to
process. (Cannot verify with automated
services, self-employed or retired)

☐ Landlord Verification - 2-5 days to process.
(Cannot verify homeowner)

☐ Social Security Search

*PLEASE INDICATE YOUR PREFERENCE FOR RESULTS: : FAX ☐ EMAIL ☒ PHONE ONLY ☐

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Tacoma - tacoma@walandlord.com (Phone: 564-220-0246 | Fax: 253-944-9070)

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