



Professional Management, INC.

Tenant Screening Application

Street Address
510 8th Street West
Billings, MT 59101

Mailing Address
P.O. Box 22006
Billings, MT 59104

Phone (406) 259-7870 • Toll Free (877) 776-3648 • Fax (406) 259-1413

A NON-REFUNDABLE \$35.00 (PER PERSON OVER THE AGE OF 18) APPLICATION FEE TO COVER CREDIT REPORT AND OTHER PROCESSING COSTS MUST BE PAID IN ADVANCE. PLEASE ALLOW 48 HOURS FOR PROCESSING. PAID FEE DOES NOT GUARANTEE A RENTAL. ALL BLANKS MUST BE COMPLETED ON BOTH PAGES.

LEASE APPLICATION: Date: _____ (DOB = Date of Birth)

Address Applied for _____ Rent \$ _____

Name _____ **Social Security #** _____ **DOB** ____/____/____

Home Phone (____) ____ - _____ Work (____) ____ - _____ Cell (____) ____ - _____

Spouse _____ **Social Security #** _____ **DOB** ____/____/____

Present Address _____ City _____ State _____ Zip _____

Dates at this address: from _____ to _____ Rent \$ _____

Reason for moving _____

Owner/Manager _____ Phone (____) ____ - _____

Previous Address _____ City _____ State _____ Zip _____

Dates at this address: from _____ to _____ Rent \$ _____

Reason for moving _____

Owner/Manager _____ Phone (____) ____ - _____

NO OTHER PERSONS TO RESIDE AT ANY TIME WITHOUT WRITTEN CONSENT OF PROPERTY MANAGER.

Applicant Initial _____

Names of all persons who will be living at the residence applied for:

(A separate application must be completed for any non-spouse 18 or older.)

Smoker____ Non-smoker____ Other occupants: Smokers____ Non-smokers____

Employer _____ Full-time____ Part-time____

Employment Dates: from _____ to _____ Immediate Supervisor: _____

Phone (____) ____ - _____ Gross Monthly Income: \$ _____ Type of work: _____

Spouse's Employer _____ Full-time____ Part-time____

Employment Dates: from _____ to _____ Immediate Supervisor: _____

Phone (____) ____ - _____ Gross Monthly Income: \$ _____ Type of work: _____

Other Income Sources _____

Provide recent copies documenting each source of income – include financial aid, social security, and self-employment.

Checking Account (Y/N)____ Savings Account (Y/N)____

Have you ever filed bankruptcy?____ If yes, what year: _____

Have you ever been evicted?____ If yes, what year: _____

Application continued on next page

Do you have any PETS? Yes_____ No_____ If yes, how many _____

Breed _____ Weight_____ Age_____ Spayed/Neutered Yes_____ No_____

Breed _____ Weight_____ Age_____ Spayed/Neutered Yes_____ No_____

The following pets are not allowed: Doberman, Rottweiler, Chow, Pit Bull, German Shepherd, Akita, Husky, Malamute, Shar Pei, Wolf Hybrid, Presa Canario or any mix of these breeds.

Pet photo and veterinarian documentation of breed and tag number needs to be provided at lease signing.

Vehicles:

Year	Make	Model	License Number
_____	_____	_____	_____
_____	_____	_____	_____

Have you or anyone that lives with you, rented from Professional Management, Inc. previously? Yes_____ No_____

AUTHORIZATION FOR VERIFICATION, OBTAINING OF A CREDIT REPORT, AND REPORTING TENANT HISTORY
I, the undersigned, am an applicant to rent or lease a premises located at any address, and hereby authorize PROFESSIONAL MANAGEMENT, INC. to do the following in the course of processing my application:

Verification of all application information given by me to PROFESSIONAL MANAGEMENT, INC.; Obtain a credit report to be used by PROFESSIONAL MANAGEMENT, INC. for evaluation of past and present credit worthiness; Report any and all past tenant history to PROFESSIONAL MANAGEMENT, INC.; and PROFESSIONAL MANAGEMENT, INC. may report present and future tenant history to credit bureaus through an authorized agent.

I HEREBY AUTHORIZE THE FOLLOWING PERSONS OR ENTITIES TO RELEASE THE FOLLOWING INFORMATION TO PROFESSIONAL MANAGEMENT, INC. AND ITS MEMBERS:

- My credit history from any credit reporting agency;
- Any and all income information from present or former employers and/or any government agency;
- Any and all rental history from current and former landlords;
- Any and all other information from anyone else named by me (us) on the rental application.

Criminal History:

PROFESSIONAL MANAGEMENT, INC. RESERVES THE RIGHT NOT TO RENT TO PERSONS WHO HAVE BEEN CONVICTED OF A CRIME.

Have you or any other intended occupant, including minors, ever been charged (whether or not resulting in a conviction) or convicted of, or pleaded guilty or "no contest" to a felony? Yes_____ No_____

Have you or any other intended occupant, including minors, ever been convicted of or pleaded guilty or "no contest" to a misdemeanor involving sexual misconduct or the manufacturing of drugs whether or not resulting in a conviction? Yes_____ No_____

Are you or any other intended occupant, including minors, required to register as a Violent or Sex Offender in any jurisdiction? Yes_____ No_____

IT IS ILLEGAL TO DISCRIMINATE AGAINST ANY PERSON BECAUSE OF RACE, COLOR, RELIGION, SEX, HANDICAP, FAMILIAL STATUS, OR NATIONAL ORIGIN

I DECLARE THAT THE INFORMATION GIVEN BY ME TO PROFESSIONAL MANAGEMENT, INC. IS TRUE, CORRECT, AND ACCURATE. I UNDERSTAND THAT PROFESSIONAL MANAGEMENT, INC. MAY TERMINATE ANY AGREEMENT ENTERED INTO IN RELIANCE ON ANY MISSTATEMENT MADE ON THE TENANT SCREENING FORM.

DATE: _____ SIGNATURE _____

PLEASE PRINT NAME _____

DATE: _____ SIGNATURE _____

PLEASE PRINT NAME _____



How did you hear about this rental? _____

