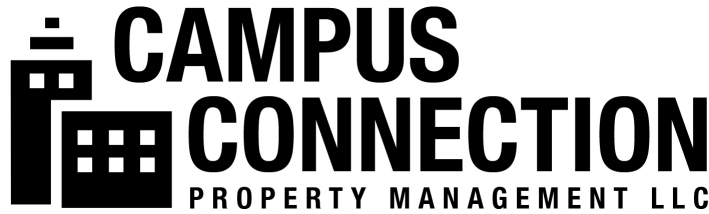


Debit/Credit Cards and Checks Accepted for applications

(Debit/credit cards NOT accepted for rent or deposits)



NO CASH ACCEPTED

236 East13th, Suite 1, Eugene, OR 97401

(541) 556-1144

Fax: (541) 344-1522 E-mail address: ccpm@oregoncampusrentals.com

NO SMOKING INSIDE ANY UNIT PICTURE ID IS REQUIRED WITH APPLICATION

NO GROWING OR STORING MARIJUANA ON THE PREMISES IS ALLOWED.

NO SMOKING MARIJUANA INSIDE UNIT.

APPLICATION TO RENT

CCPM STAFF TO COMPLETE

Property Address: _____

Monthly Rent: \$ _____ Amount of Security Deposit: \$ _____

Applicant # _____ Date: _____ Move in Date: _____

Examined picture identification _____ Type of ID _____

PERSONAL INFORMATION

NAME: _____

First

Middle

Last

Preferred Name _____

Email Address; _____ **Cell Phone #** _____

SS # _____ **Birth Date:** ____/____/____

Driver's License, State and Number: _____

Current Address: _____ **Apt. #** _____ **City:** _____ **State:** _____ **Zip** _____

Since; _____ **Why are you moving?** _____

Current Landlord: _____ **Phone #:** _____ **Rent Amt:\$** _____

Previous Address: _____ **City:** _____ **State:** _____ **Zip** _____

From: _____ to _____ Why did you move? _____

Previous Landlord: _____ Phone # _____

Previous Address: _____ City: _____ State: _____ Zip _____

From: _____ to _____ Why did you move? _____

Have you ever been evicted? _____ Been sued by Landlord? _____

Been convicted, pleaded guilty, or no contest to a crime? _____

If yes to any of these, please explain: _____

EMPLOYMENT INCOME:

Applicant's Employer: _____ How long: _____

Supervisor: _____ Phone #: _____

Job Title: _____ Take home pay per month: _____

Other Income (per month)\$ _____ Source: _____ Phone # _____

Other Income (per month)\$ _____ Source: _____ Phone # _____

BANK

Bank: _____ -

REFERENCES

Next of kin: _____ Phone _____

Name	Address	Relationship
------	---------	--------------

Emergency Contact: _____ Phone _____

Name	Address	Relationship
------	---------	--------------

Personal Reference: _____ Phone _____

Name	Address	Relationship
------	---------	--------------

Automobile: Make _____ Model _____ Year _____ License # _____ State _____

Pet #1 **Pet #2**

Tvne: _____ Size: _____ Weight: _____ Tvne: _____ Size: _____ Weight _____

Has pet ever injured anyone or damaged anything? _____ Has pet ever injured anyone or damaged anything? _____

PLEASE INITIAL: I HAVE READ THE CCPM PET POLICY AND AGREE TO ALL THE POLICIES: _____

MEMBERS OF HOUSEHOLD:

For purpose of identification only, please list names and either ages or date of birth of other persons to occupy unit:

APPLICANT SCREENING CHARGE DISCLOSURES:

- 1) Campus Connection Property Management (CCPM) may obtain a tenant screening report which generally consists of:
 - a) Public records, including but not limited to judgments, liens, evictions and status of collection amounts;
 - b) Information verification;
 - c) Criminal Records
- 2) CCPM is requiring payment of an Applicant Screening Charge \$ 50.00 none of which is refundable unless CCPM does not screen the applicant.

I understand I have the right to dispute the accuracy of any information provided to Campus Connection Property Management by a screening service. I am aware that an incomplete application may cause delays or result in denial of tenancy. I certify the above information is correct and complete and hereby authorize you to make any inquiries you feel necessary to evaluate my tenancy including contacting current/former landlords. If CCPM is requiring payment of an applicant screening charge, applicant acknowledges receiving a copy of or reading CCPM's screening guidelines.

Applicant **Date**

PLEASE ANSWER: How did you find about unit you are applying for?

Sign in Yard
 Craigslist
 CCPM Website
 Referral from a friend
 Review online
 Zillow
 Hotpad.com
 Walk-in
 Other
 Post card mailer