

# RENTAL APPLICATION



Applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address of Premises: \_\_\_\_\_

Landlord or Property Manager: Seeley-Swan Vacations

Application Fee Was Received On\*: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\*We charge a \$25.00 Application Fee per Applicant.

All rental business conducted is in conformance with current Montana Code Annotated, FAIR Housing, Americans with Disabilities Act and does not practice or allow discrimination based upon race, color, sex, religion, creed, age, handicap, disability, national origin, marital status, or family status.

## Applicant Information

First: \_\_\_\_\_ M: \_\_\_\_\_ Last: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

ID Number: \_\_\_\_\_ State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Household Composition

Please list any and all persons (including family members) who will reside on the premises.

First: \_\_\_\_\_ M: \_\_\_\_\_ Last: \_\_\_\_\_

First: \_\_\_\_\_ M: \_\_\_\_\_ Last: \_\_\_\_\_

First: \_\_\_\_\_ M: \_\_\_\_\_ Last: \_\_\_\_\_

First: \_\_\_\_\_ M: \_\_\_\_\_ Last: \_\_\_\_\_

First: \_\_\_\_\_ M: \_\_\_\_\_ Last: \_\_\_\_\_

Does anyone intending to reside at the premises require housing accommodations because of a disability or other condition?: Yes | No

If yes, what is needed?: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Pets

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Type: \_\_\_\_\_ Breed: \_\_\_\_\_

License Number: \_\_\_\_\_ Current on vaccinations? Yes | No

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Type: \_\_\_\_\_ Breed: \_\_\_\_\_

License Number: \_\_\_\_\_ Current on vaccinations? Yes | No

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Type: \_\_\_\_\_ Breed: \_\_\_\_\_

License Number: \_\_\_\_\_ Current on vaccinations? Yes | No

## Vehicles

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License Plate Number: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License Plate Number: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License Plate Number: \_\_\_\_\_

## Employment

Employer: \_\_\_\_\_ Employer's Number: \_\_\_\_\_

Employer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Is this a permanent position?: \_\_\_\_\_

If temporary, how long? \_\_\_\_\_

Salary: \_\_\_\_\_ or Hourly: \_\_\_\_\_ If hourly, how many hours a week?: \_\_\_\_\_

If you are self-employed, you must then provide a copy of the previous year's tax return.

If you are not employed or you would like us to consider outside income, please explain:

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## Personal References

Reference 1: \_\_\_\_\_

Reference 2: \_\_\_\_\_

Reference 3: \_\_\_\_\_

## Credit References

Reference 1: \_\_\_\_\_

Reference 2: \_\_\_\_\_

Reference 3: \_\_\_\_\_

## Rental History

Current Landlord: \_\_\_\_\_ Landlord's Phone: \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Current Rental Amount: \_\_\_\_\_ Length of Time at This Address: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Landlord's Phone: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Previous Rental Amount: \_\_\_\_\_ Length of Time at This Address: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Landlord's Phone: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Previous Rental Amount: \_\_\_\_\_ Length of Time at This Address: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

Have you ever been evicted or violated your lease? Yes | No

If yes, please explain: \_\_\_\_\_

Is there any reason you cannot have a utility service turned on in your name?: Yes | No

If yes, please explain: \_\_\_\_\_

Applicant hereby authorizes the Landlord or Property Manager and their legal representatives to contact any persons, agencies, corporations, employers, offices, groups, or organizations to obtain any information or material which is deemed necessary to verify the information and rental history pertaining to this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Completed