



# BCPM

Boise City Property Management

5513 N. Glenwood St. Ste. A Boise, ID 83714

Office: 208-906-0638

Fax: 208-343-4634

## Rental Application

\$25.00 Application fee per adult \*\*Check or Money Order Only

Property: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Expected move in date: \_\_\_\_\_ Lease Terms: \_\_\_\_\_

### Personal Information

Name: \_\_\_\_\_ SS# \_\_\_\_\_

DOB \_\_\_\_\_ DLN \_\_\_\_\_ State \_\_\_\_\_ Exp. \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Spouse: \_\_\_\_\_ SS# \_\_\_\_\_

DOB \_\_\_\_\_ DLN \_\_\_\_\_ State \_\_\_\_\_ Exp. \_\_\_\_\_

Maiden or Other Names Used: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

### Residential History \*3 years of history needed

Current Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Owner/ Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Move in Date: \_\_\_\_\_ Move Out Date: \_\_\_\_\_ Rental Amount: \_\_\_\_\_

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

OfficeUseOnly : \_\_\_\_\_

Previous Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Owner/ Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Move in Date: \_\_\_\_\_ Move Out Date: \_\_\_\_\_ Rental Amount: \_\_\_\_\_



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

**Employment History** \*if less than 3 years with current employer please provide previous employer.

Current: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Gross Wages: \_\_\_\_\_ M / Y / W/ 2XMonth Status \_\_\_\_\_ (FT/ PT/ Temp/ Self)

Description of Work: \_\_\_\_\_

**OfficeUseOnly:** \_\_\_\_\_

Previous \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Title: \_\_\_\_\_

Date of Hire: \_\_\_\_\_ End Date: \_\_\_\_\_ Gross Wages: \_\_\_\_\_ M / Y / W/ 2XMonth

Status: \_\_\_\_\_ (FT/ PT) Rehire Status: \_\_\_\_\_ Position/ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**OfficeUseOnly:** \_\_\_\_\_

**Spouse's Employment History** \*please provide 3 years of history.

Current: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Gross Wages: \_\_\_\_\_ M / Y / W/ 2XMonth Status \_\_\_\_\_ (FT/ PT/ Temp/ Self)

Description of Work: \_\_\_\_\_

**OfficeUseOnly:** \_\_\_\_\_

Previous \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Title: \_\_\_\_\_

Date of Hire: \_\_\_\_\_ End Date: \_\_\_\_\_ Gross Wages: \_\_\_\_\_ M / Y / W/ 2XMonth

Status: \_\_\_\_\_ (FT/ PT) Rehire Status: \_\_\_\_\_ Position/ Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_



OfficeUseOnly: \_\_\_\_\_

**Income** \*List only income that you want to be verified and to be considered.

Person Receiving	Source of Income/ Contact Info	Amount	How Often

**Total:** \_\_\_\_\_

OfficeUseOnly: \_\_\_\_\_

**Expenses**

Please Specify- Owing To:	Balance:	Monthly Payment:
Auto Loan		
Auto Insurance		
Health Insurance		
Renter's Insurance		
Credit Card		
Credit Card		
Child Support		
Other		
Other		
Totals		

List all outstanding Judgments, Liens, and Collections: \*if additional space is needed use back

**Emergency Contact Information**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Address/City/State/Zip: \_\_\_\_\_

Name of Nearest Relative: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Address/City/State/Zip: \_\_\_\_\_



**Criminal History** \*A conviction will not necessarily disqualify applicant.

Have you ever been convicted of, plead guilty or no contest to a crime- civil or criminal, felony or misdemeanor? \_\_\_\_\_ Description, include the year: \_\_\_\_\_

Are you currently on probation or parole? \_\_\_\_\_

Name of Officer: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you have any pending charges or convictions, felony or misdemeanor? \_\_\_\_\_

Description: \_\_\_\_\_

Have you previously been on probation or parole? \_\_\_\_\_ Year: \_\_\_\_\_

Name of Officer: \_\_\_\_\_ Phone: \_\_\_\_\_

OfficeUseOnly: \_\_\_\_\_

**Credit History**

Have you ever filed for bankruptcy? \_\_\_\_\_ Year: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

Have you ever been evicted from or asked to leave any tenancy? \_\_\_\_\_ Date: \_\_\_\_\_

Reason: \_\_\_\_\_

OfficeUseOnly: \_\_\_\_\_

**Personal References**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

**Other Occupants** \*\*any person over 18 years old must have a criminal background check

Name: \_\_\_\_\_ DOB \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ DOB \_\_\_\_\_ Relationship \_\_\_\_\_



**Miscellaneous Information**

Are you or any household member(s) in need of an accommodation? **Y N** Please specify:

\_\_\_\_\_

Are you or any household member(s) a smoker? \_\_\_\_\_ Do you have any pets? \_\_\_\_\_

Mark with the appropriate number.

Dogs \_\_\_\_\_ Cats \_\_\_\_\_ Birds \_\_\_\_\_ Reptiles \_\_\_\_\_ Rodents \_\_\_\_\_

Other \_\_\_\_\_

**OfficeUseOnly:** \_\_\_\_\_

I hereby make application to rent the premises located at \_\_\_\_\_ for \$ \_\_\_\_\_ per month and a security/cleaning deposit of \$ \_\_\_\_\_. **I am paying the non-refundable fee of \$ \_\_\_\_\_, for a Credit and Background Check.** I understand that by making this application, I am agreeing to sign a rental agreement and rent the premises if approved, within 48 hours of approval. I understand that this is not a rental/lease agreement or a contract. I understand that any false or misleading information which has been supplied on this form will cause this application to be disapproved and I will forfeit all fees. I authorize Boise City Property Management to verify all the information I have provided on this application. I also authorize Boise City Property Management to obtain a Credit Check and Background Check.

\_\_\_\_\_ Initials

I hereby certify that all information contained in this application is true and correct to the best of my knowledge. I hereby authorize verification of all information contained herein.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



**Boise City Property Management**  
5513 N. Glenwood St. Suite A, Boise, ID 83714  
Office: 208-906-0638 Toll Free: 888-292-7770  
Fax: 208-343-4634

### Release of Information

I, \_\_\_\_\_, SS# \_\_\_\_\_ give  
permission to all employers, rental providers, credit providers and other agencies to provide  
personal information concerning my employment, criminal, rental, and credit history, and any  
other information to Boise City Property Management. I authorize a copy of this to be treated as  
an original if necessary.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I, \_\_\_\_\_, SS# \_\_\_\_\_ give  
permission to all employers, rental providers, credit providers and other agencies to provide  
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Signature \_\_\_\_\_ Date \_\_\_\_\_

