Application ____ of ____.

Cascade Community Management, LLC

Chuck Hanson Real Estate

Application may be delivered to the CCM office located at: 12550 SE 93rd Ave, Suite 250, Clackamas, OR 97015
or faxed to: 503-214-8872. Office: 503-658-6605

Cascade Community Management, LLC requires each person over the age of 18 that will be residing in the home complete an application and undergo screening. **Each applicant requires a fee of $45.00.** Applications are not considered RECEIVED until payment is also received. Applications are processed on a first-come first-served basis. If your application is received after another that is approved, your application will not be processed and your payment will either be shredded or returned to you. Information provided here is for Cascade Community Management, LLC only and will not be provided to any 3rd party person or business.

Property Address Applying For: _____ Move-In Date Requested: _____

Personal Information:

Applicant Name: _____
First Middle Last

Phone (Cell): _____ Phone (Home): _____ Email Address: _____

Social Security#: _____ Date of Birth: _____ Drive's License #: _____ State: _____

Rental History:

☐ Rent or ☐ Own When did you move-in?: _____ When do you plan to move-out?: _____

Current Address: _____ City: _____ State: _____

Landlord's Name: _____ Landlord's Number: _____

☐ Rent or ☐ Own When did you move-in?: _____ When did you move-out?: _____

Previous Address: _____ City: _____ State: _____

Landlord's Name: _____ Landlord's Number: _____

Employment Information:

Employer: _____ Phone Number: _____ Length of Employment: _____

Job Title: _____ Gross Monthly Income: $_____ Other Income: $ _____

Other Occupants:

Name(s) & Ages: _____

Pets:

Number of Dog(s) _____ Dog(s) Breed: _____ Weight: _____
Number of Cat(s) _____

I certify that the above information is correct and complete and hereby authorize Cascade and its' employees to make any necessary inquires deemed necessary to evaluate my tenancy and credit standing including, but not limited to, a check of my credit, criminal, and rental history. 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. I also understand that within 24 hours of approval, I am required to pay a Non-Refundable Reservation Deposit and must take possession of the property within 14 calendar days. If I do not pay the Reservation Deposit within 24 hours upon approval, than I forfeit my application and fees for the above stated property unless otherwise instructed by CCM. All Reservation Deposits are credited on the Lease Agreement and is not an additional charge. **I also understand that ALL DEPOSITS and MOVE-IN PAYMENTS MUST BE IN THE FORM OF A MONEY ORDER OR CASHIERS CHECK.**

Applicant Signature: _____ Date: _____