



THA Staff: This Screening is for (Check one box from each row)

THA Client: HCA HCV-HOP Waitlist PM Waitlist PM Property
Report Type: THA Court THA Mini (PM) Minor (Juvenile) Live-in Aid/Caregiver

RESIDENTIAL RENTAL APPLICATION FOR TACOMA HOUSING AUTHORITY

EACH ADULT MUST FILL OUT SEPARATE APPLICATION

Landlord will not accept a comprehensive reusable tenant screening report

THA Staff: This application is for (check box):

Applicant applying for housing assistance Caregiver/Live-in Aid Addition to the Household

- Property: _____ Address: _____ Unit # _____ Rent: \$ _____

Applicant

Complete Every Item on Application

Incomplete and/or Inaccurate Information May Result in Process Delay or Denial of Tenancy

Applicant's Complete Name: _____ Date of Birth: _____

SSN#: _____ DL#/State issued: _____

Tel#: _____ Email Address: _____

Other Occupant's Name, Age & Relationship: _____

Are any of the other occupants currently married or separated but not living with their spouse? Yes ___ No ___

CURRENT ADDRESS (Required Entry)

(check box) I am presently Homeless

Street _____ City _____ State _____ Zip _____
Name of Apts _____ How Long(Mo/Da/Yr) From _____ To _____
Landlord/Mgmt Co. _____ Address _____
Tel# _____ Rent/Own/Lease _____ Email: _____

PRIOR ADDRESS

Street _____ City _____ State _____ Zip _____
Name of Apts _____ How Long(Mo/Da/Yr) From _____ To _____
Landlord/Mgmt Co. _____ Address _____
Tel# _____ Rent/Own/Lease _____ Email: _____

ANIMALS

Do you have an animal? Yes ___ No ___ If yes, number, size, and type(s) _____

HAVE YOU OR ANY OTHER HOUSEHOLD MEMBER:

Ever lived in Federally Assisted Housing in last 5 years? Yes ___ No ___ If yes, give name and location of property: _____

Ever been taken to court for owing money to a landlord? Yes ___ No ___

If Yes, to whom did you owe money? (Provide details: Name of company, amount owed, location of courthouse): _____

Ever been evicted or refused to pay rent? Yes ___ No ___ If yes, give details: What County(ies) and State(s)? _____
When? _____

Ever been Charged or Convicted of a Crime? Yes ___ No ___ If yes, give details: What is the nature of the offense? What
County(ies) and State(s)? _____ When? _____

Are you or any other household member a Lifetime Registered Sex Offender? Yes ___ No ___

Ever used any other name(s)? Yes ___ No ___ If yes, list name(s) _____

Ever been evicted from Federal Assisted Housing? Yes ___ No ___ If yes, give date, name of property and location: _____

What other counties and/or states have you lived in? _____

Have you or any other household member filed bankruptcy? Yes ___ No ___ If yes, when: _____



THE DECISION TO LEASE/RENT REMAINS WITH THE PROPERTY MANAGER

Addendum (A) to Application for Tenancy

LETTER OF AUTHORIZATION

Revised 9/2022

To Whom It May Concern:

In compliance with the Fair Credit Reporting Act, State and Federal laws, this is to inform you and your household members that an investigation involving the statements made on this application for tenancy are being initiated by RentGrow, Inc. 177 Huntington Ave, Suite 1703 #74213 Boston, MA 02155-3153 ph: (800) 898-1351. I certify that to the best of my knowledge all statements are "true and complete". I further authorize Rent Grow, Inc. to obtain Credit Reports, Employment References (including verifying salary), Court Records and Character References, Mode of Living, and Rental References as needed to verify all information put forth on this application and otherwise available regarding all applicants identified on this application.

Furthermore I warrant the accuracy of all information contained on this rental application, including that relating to the other intended occupants of the subject property. I understand and agree that if subsequently a determination is made that I provided false or inaccurate information on the rental application it is a breach of the terms of any rental agreement signed based on that information and Owner and/or his/her agent may take legal action to terminate said Agreement.

In addition, I confirm receipt of the **Tenant Selection Policy** (per WA State Fair Tenant Screening Act, 2012) from this landlord/property management BEFORE submitting this completed rental application and that I read, and understand my rights as described therein.

You have the right to obtain a free copy of the consumer report in the event of a denial or other adverse action, and to dispute the accuracy of information appearing in the consumer report. The consumer reporting agency: RentGrow, Inc.

177 Huntington Ave, Suite 1703 #74213
Boston, MA 02155-3153
(800) 898-1351
www.rentgrow.com

I also understand Rent Grow's role is to provide background information to landlord/property manager. Rent Grow does not make the decision to lease/rent or take any adverse action. Decision to lease/rent re-mains with the property manager/landlord.

Applicant's Name (please print)

Applicant's Signature

Date of Authorization