



## Gatewest Management Rental Application

Date of application: \_\_\_\_\_ Property applied for: \_\_\_\_\_

Desired date of occupancy: \_\_\_\_\_

Is the total move-in amount available now (rent and deposit)?  Yes  No

**Applicant's Full Name:** \_\_\_\_\_ **M / F** **DOB:** \_\_\_\_\_

Have you ever used another name(s)? **Y / N** If yes, name(s) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Phone:(\_\_\_\_\_)\_\_\_\_\_

Drivers License #: \_\_\_\_\_ State Issued by: \_\_\_\_\_

**Do you have a service/emotional support animal? Y/N** (Please attach proper documentation or ask)

**Do you have pets? Y/N** If yes to either: how many? \_\_\_\_\_ What type(s)? \_\_\_\_\_

Breed(s)? \_\_\_\_\_ Age(s)? \_\_\_\_\_ Weight(s)? \_\_\_\_\_ Gender(s)? \_\_\_\_\_

**Do any of the people residing in this unit smoke? Y / N**

### ADDRESSES

**Present Address:** \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Rent: \$ \_\_\_\_\_ Move in date: \_\_\_\_\_

**Present Landlord:** \_\_\_\_\_ Phone:(\_\_\_\_\_)\_\_\_\_\_

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

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

Rent: \$ \_\_\_\_\_ Move in date: \_\_\_\_\_

**Previous Landlord:** \_\_\_\_\_ Phone:(\_\_\_\_\_)\_\_\_\_\_

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

### ADDITIONAL OCCUPANTS FOR DESIRED RENTAL (Who will reside with you in the property applied for?)

NAME	RELATIONSHIP	BIRTH DATE

### VEHICLES

**#1 Vehicle:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_ Lien Holder: \_\_\_\_\_

**#2 Vehicles:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_ Lien Holder: \_\_\_\_\_

### EMPLOYMENT

**EMPLOYER:** \_\_\_\_\_ Since: \_\_\_\_\_ Position: \_\_\_\_\_

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

Supervisor: \_\_\_\_\_ Full time / Part time Monthly Income\$: \_\_\_\_\_

Phone:(\_\_\_\_\_) \_\_\_\_\_

**PREVIOUS EMPLOYER:** \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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

### OTHER SOURCES OF INCOME

Source: \_\_\_\_\_ Income:\$ \_\_\_\_\_ Weekly / Biweekly / Monthly / Yearly

Source: \_\_\_\_\_ Income:\$ \_\_\_\_\_ Weekly / Biweekly / Monthly / Yearly

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**REFERENCE**

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**Nearest Relative:** \_\_\_\_\_ Relation: \_\_\_\_\_

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

Phone:(\_\_\_\_\_) \_\_\_\_\_

**Non-Relative:** \_\_\_\_\_

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

Phone:(\_\_\_\_\_) \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ Phone:(\_\_\_\_\_) \_\_\_\_\_

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**Explain any "YES" answers below with names and details:**

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Has any signer ever been sued for bills?                 | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| Has any signer ever broken a lease?                      | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| Has any signer ever been sued for eviction?              | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| Has any signer ever been bankrupt?                       | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| Has any signer been convicted of a federal or state law? | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |
| Has any signer ever been guilty of a felony?             | <input type="checkbox"/> Yes | <input type="checkbox"/> NO |

**I Am (Check one):**

- |  |
|--|
| <input type="checkbox"/> A citizen of the USA  |
| <input type="checkbox"/> A noncitizen national of the USA                            |
| <input type="checkbox"/> A lawful permanent resident<br>(Alien # _____)              |
| <input type="checkbox"/> An alien authorized to work<br>(Alien or Admission # _____) |

If "yes" to any above, please explain: \_\_\_\_\_

Applicant authorizes Gatewest Management to contact past and present landlords, employers, creditors, credit bureau, neighbors and any other sources deemed necessary to investigate applicant. All materials remain the property of Gatewest.

All the information is true, accurate and complete to the best of applicant's knowledge. Gatewest Management reserves the right to disqualify tenant and/or evict if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME

X \_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME OF APPLICANT

**Gatewest Property Management  
P.O. Box 8599  
Missoula, MT 59807  
Phone (406)-728-7333  
Fax (406)728-0375**

**STANDARDS OF OCCUPANCY: 1 Tenant per studio—if a couple (2 tenants) wish to rent a studio, rent will increase by \$125.00 per month. For 1 bedroom and up, no more than 2 tenants are allowed per bedroom.**

