

Suquamish Tribe Rental Application



Name: _____ SS#: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Driver's License Number: _____ State: _____

Suquamish Tribe Enrollment # _____ Email address: _____

Co-applicant:

Name: _____ SS#: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Driver's License Number: _____ State: _____

Total Number of Adults to Occupy Home _____ Total Number of Children _____

Minimum Bedrooms Requested _____

Preference or need of an accessible unit Yes No

Total Number of Pets _____ Description of Pets _____

Current Landlord: _____

Street Address _____ City _____ State _____ Zip _____

Phone _____ How Long at This Address _____

Past Landlord: _____

Street Address _____ City _____ State _____ Zip _____

Phone _____ How Long at This Address _____ Reason for Leaving _____

Applicant's Employer: _____

Street Address _____ City _____ State _____ Zip _____

Phone: _____ Your Position: _____ Supervisor's Name: _____

How Long at Current Job: _____ Monthly Income _____

Co-Applicant's Employer: _____

Street Address _____ City _____ State _____ Zip _____

Phone: _____ Your Position: _____ Supervisor's Name: _____

How long at job: _____ Monthly income _____

Has any member of the household ever been convicted of a felony? YES / NO If yes, explain conviction:

Name _____ Explanation: _____

Name _____ Explanation: _____

Name _____ Explanation: _____

Personal References:

Name _____ Years Known _____ Relationship _____ Phone _____

Name _____ Years Known _____ Relationship _____ Phone _____

Name _____ Years Known _____ Relationship _____ Phone _____

The applicant gives the property owner or manager the right to obtain credit information and verify references.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____