

# Tenant Screening



2810 Central Ave. Unit C  
Billings, MT 59102  
406-252-9242

All tenants 18 and older must completely fill out the application. There is a \$45.00 application fee per applicant. Checks are to be made payable to Boyer Properties, LLC. There are no refunds. Please mail completed application to our office or drop off at our rent drop box located on the right hand side of our office door. Both application and fee must be completed before application can be processed.

Unit Applying for:

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## **Applicant Personal Information:**

Applicants Full Name:

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Applicants Phone

#: \_\_\_\_\_

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Home

Cell

Work

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Other

Names Used: \_\_\_\_\_

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

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## **Co-Applicant Personal Information:**

Co-Applicant Full Name:

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Co-Applicants Phone

#: \_\_\_\_\_

Home  
Work

Cell

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Other  
Names Used: \_\_\_\_\_

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

**Resident History:**

Current Residence: Rent or Own (please circle one)

\_\_\_\_\_

Current Address: Street Apt# City,  
State Zip Code

Dates at this Address: \_\_\_\_\_ to \_\_\_\_\_ Monthly Payment:  
\_\_\_\_\_

Landlord or Mortgage Company Name & Phone Number:  
\_\_\_\_\_

Continue on Back

Previous Residence: Rent or Own (please circle one)

\_\_\_\_\_

Previous Address: Street Apt# City,  
State Zip Code

Dates at this Address: \_\_\_\_\_ to \_\_\_\_\_ Monthly Payment:  
\_\_\_\_\_

Landlord or Mortgage Company Name & Phone Number:  
\_\_\_\_\_

**Employment History:**

\_\_\_\_\_

\_\_\_\_\_



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Applicant Signature

Date

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Co- Applicant Signature

Date