

Once this application has been approved, you have 24 hours in which to cancel or deposit will be forfeited.

Today's Date: \_\_\_\_\_

APPLICATION PROCESSING FEE \$ 55.00  
 THIS FEE IS NON-REFUNDABLE SHOULD THIS APPLICATION FOR RENTAL BE ACCEPTED OR NOT.



■ UNMARRIED APPLICANTS PLEASE COMPLETE SEPARATE APPLICATIONS.

INSERT "NIA" FOR NON-APPLICABLE ITEMS.

LEASE TYPE \_\_\_\_\_ LEASE EFFECTIVE DATE \_\_\_\_\_ DATE MOVING IN \_\_\_\_\_  
 UNIT TYPES: A) EFFICIENCY B) 1 BR C) 2 BR D) 3 BR BLDG. # \_\_\_\_\_ APT. # \_\_\_\_\_

**APPLICANT (PLEASE PRINT CLEARLY)**  
 APPLICANT #1 (COMPLETE LEGAL NAME) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ DRIVER'S LICENSE # \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_ DEPENDENTS \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_ APT. # \_\_\_\_\_ HOW LONG \_\_\_\_\_ DATA BASE \_\_\_\_\_  
 CITY/STATE/ZIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_

**DO NOT WRITE BELOW TO BE CHECKED BY LEASING AGENT**

PRESENT LANDLORD OR CARETAKER (LIST 3 YEARS RENTAL HISTORY) \_\_\_\_\_ PHONE # \_\_\_\_\_ RENT PAID \_\_\_\_\_  
 PREVIOUS ADDRESS \_\_\_\_\_ APT. # \_\_\_\_\_ HOW LONG \_\_\_\_\_  
 PREVIOUS LANDLORD OR CARETAKER \_\_\_\_\_ PHONE # \_\_\_\_\_ RENT PAID \_\_\_\_\_

phone:  
email:

**SOURCE OF INCOME (EMPLOYMENT IF EMPLOYED) 2 YEAR HISTORY**  
 APPLICANT #1 (EMPLOYER'S NAME) \_\_\_\_\_ SALARY \_\_\_\_\_ PHONE # \_\_\_\_\_ POSITION \_\_\_\_\_  
 ADDRESS AND SUPERVISOR'S NAME \_\_\_\_\_ HOW LONG \_\_\_\_\_  
 PREVIOUS EMPLOYER \_\_\_\_\_ PHONE # \_\_\_\_\_ HOW LONG \_\_\_\_\_  
 ADDRESS AND SUPERVISOR'S NAME \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
 ADDRESS AND SUPERVISOR'S NAME \_\_\_\_\_ SALARY \_\_\_\_\_ PHONE # \_\_\_\_\_ POSITION \_\_\_\_\_  
 ADDRESS AND SUPERVISOR'S NAME \_\_\_\_\_ HOW LONG \_\_\_\_\_

**ADDITIONAL SOURCE OF INCOME (IE: PART TIME JOB, ASSISTANCE, DISABILITY)**  
 SOURCE \_\_\_\_\_ AMOUNT \_\_\_\_\_ PHONE # \_\_\_\_\_

**BANK ACCOUNT (INDICATE BRANCH & SERVICES USED)**  
 NAME \_\_\_\_\_ AMOUNT \_\_\_\_\_ PHONE # \_\_\_\_\_  
 ADDRESS/CITY/STATE/ZIP \_\_\_\_\_  
 SAVINGS  
 CHECKING  
 LOAN

**HAVE YOU EVER: (PLEASE EXPLAIN ANY "YES" ANSWERS)**  
 FILED FOR BANKRUPTCY?  Yes  No (HOW LONG AGO?) \_\_\_\_\_  
 BEEN EVICTED FROM TENANCY?  Yes  No \_\_\_\_\_  
 WILLFULLY AND INTENTIONALLY REFUSED TO PAY RENT WHEN DUE?  Yes  No \_\_\_\_\_  
 BEEN CONVICTED OF A FELONY?  Yes  No \_\_\_\_\_

**AUTOS**  
 MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ LICENSE PLATE # \_\_\_\_\_ MODEL & COLOR \_\_\_\_\_  
 MONTHLY AUTO PAYMENTS \$ \_\_\_\_\_ PAID TO WHOM \_\_\_\_\_  
 MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ LICENSE PLATE # \_\_\_\_\_ MODEL & COLOR \_\_\_\_\_  
 MONTHLY AUTO PAYMENTS \$ \_\_\_\_\_ PAID TO WHOM \_\_\_\_\_

**REFERENCES PETS  YES  NO KIND:**  
 APPLICANT #1 \_\_\_\_\_ PHONE # \_\_\_\_\_  
 ADDRESS/CITY/STATE/ZIP \_\_\_\_\_  
 PERSONAL REFERENCES (NON-RELATIVE) \_\_\_\_\_ PHONE # \_\_\_\_\_  
 ADDRESS/CITY/STATE/ZIP \_\_\_\_\_  
 IN CASE OF EMERGENCY PLEASE CONTACT: \_\_\_\_\_ PHONE # \_\_\_\_\_  
 ADDRESS/CITY/STATE/ZIP \_\_\_\_\_

LIST ALL OCCUPANTS (NAMES)	RELATIONSHIP	AGE

The State of Minnesota Prohibits discrimination in Housing and this form has been reviewed by the Minnesota Department of Human Rights.  
 Please list on the back other data which may affect the acceptance of this application. The forgoing information is supplied to the management to induce them to rent to me and is true and correct in all respects and I authorize whatever credit investigation you may consider appropriate.  
 This investigation may include the exchange of information and a report from a credit reporting agency. If a credit reporting agency furnishes a report its name and address will be furnished upon my request.  
 IT IS UNDERSTOOD that if apartment is not taken on date agreed upon that the owner and/or its agent will retain the sum of \$ 500.00 herewith received to be held as rental obligation of Owner of its Agent to approve same to deliver occupancy of or tender any lease to said premises.

HOW DID YOU HEAR ABOUT OUR APARTMENTS?  
 APT SERVICE BOOK  APT. SERVICE  INTERNET  
 NEWSPAPER  FRIEND  
 (PLEASE SPECIFY) \_\_\_\_\_

MONEY ENCLOSED:	MONTH	AMOUNT
RENT		
PARKING		<u>50.00</u>
SECURITY DEPOSIT		<u>450.00</u>
APPLICATION FEE		<u>55.00</u>
OTHER		

SIGNATURE APPLICANT #1 \_\_\_\_\_  
 \_\_\_\_\_  
 LEASING AGENT \_\_\_\_\_