



RENTAL APPLICATION

APPLICATION DATE _____ **APPLIC'N FEE (non-refundable) \$** _____

LENGTH OF LEASE _____ **MONTHS** _____ **MONTHLY APT RENT \$** _____

FOR APARTMENT # _____ **MONTHLY GARAGE RENT \$** _____

APARTMENT SIZE _____ **BEDROOMS** _____ **SECURITY DEPOSIT (non-refundable) \$** _____

ADDRESS Lyndale Commons-Richfield, MN _____ **SPECIALS (if applicable)** _____

GARAGE # _____

PAYMENTS \$ _____ **FOR** _____ **CHECK #** _____ **& \$** _____ **FOR** _____ **CHECK#** _____

We understand that before obtaining keys, we will sign our lease and pay in full the BALANCE DUE of \$ _____
 We also understand that we are responsible for making all necessary arrangements for utility services to my rental unit.
 If my application is approved, I will move in on: _____ before _____ PH _____

Applicant: Full Legal Name (Last, First & Full Middle) _____ **Date of Birth** _____ **Driver's License #** _____ **Social Security #** _____

Give Former Names, Maiden Names, Short Names, Nick Names

Spouse: Full Legal Name (Last, First & Full Middle) _____ **Date of Birth** _____ **Driver's License #** _____ **Social Security #** _____

Give Former Names, Maiden Names, Short Names, Nick Names

Present Address - Street - Apt # - City - State - Zip _____ **Phone** _____ **From - To** _____

Present Landlord - or - Caretaker - and/or - Apt Complex _____ **Relationship** _____ **Phone** _____ **Rent Paid** _____

Reason for Leaving _____

Former Address - Street - Apt # - City - State - Zip _____ **Phone** _____ **From - To** _____

Former Landlord - or - Caretaker - and/or - Apt Complex _____ **Relationship** _____ **Phone** _____ **Rent Paid** _____

Reason for Leaving _____

Source of Income	Amount	Position	Phone
Address		Supervisor's Name	How Long ?
Previous Employer	Amount	Position	Phone
Address		Supervisor's Name	How Long ?
Additional Sources of Income	Amount	Amount	Phone
Auto #1 - Year - Make - Model - Color	License #	Payments	Paid To
Auto #2 - Year - Make - Model - Color	License #	Payments	Paid To
Bank #1 - Name - Location		Savings Checking Loan	Account #
Bank #2 - Name - Location		Savings Checking Loan	Account #

Name of Closest Relative of Applicant #1 _____ **Phone** _____

Address _____

Name of Closest Relative of Applicant #2 _____ **Phone** _____

Address _____

Name of Personal Reference (non-relative) _____ **Phone** _____

Address _____

Name of Person to Call in Case of Emergency _____ **Phone** _____

Address _____

Credit Reference #1 - Name - Address - Account # _____

Credit Reference #2 - Name - Address - Account # _____

List All Occupants	
Names	Age

REFERRAL SOURCE

- _____ Anoka Shopper
- _____ Apartment.Com
- _____ Apartment Finder
- _____ Apartment for Rent
- _____ Apartment Search
- _____ Drive By
- _____ For Rent
- _____ For Rent.Com
- _____ For Rent Magazine
- _____ Friend
- _____ Pioneer Press
- _____ Press Publication
- _____ Rent 411
- _____ Rent.Com
- _____ Resident Referral
- _____ Relocation Central
- _____ Star Tribune
- _____ Web Site
- _____ Other _____

We understand and agree that this application is not a lease and that it may be accepted or rejected by the Lessor.
 We hereby authorize the Lessor to obtain any and all information available from any organization for the purpose of review of our credit and rental history and any other public records, including criminal background.

Signature of Applicant

Signature of Spouse