

Minnesota Rental Application

Property Address: _____ **Application Date:** _____ **Move in Date Requested** _____

Application Processing Fee \$ _____ How would you like this fee returned? If applicable _____ Mail _____ Destroying it _____ Holding it for retrieval (1 day)
This fee is non-refundable should this application for rental be accepted or not.

INSERT "N/A" FOR NON-APPLICABLE ITEMS. ALL APPLICANTS MUST COMPLETE SEPARATE APPLICATIONS.

HOW DID YOU HEAR ABOUT US? _____

APPLICANT PERSONAL DATA (Please Print Clearly)

Complete Legal Name	Date of Birth	Driver's License #	Social Security #	# Dependents	Phone	Email
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RENTAL HISTORY (account for all months of the past three years – use additional page if necessary)

From	To	Complete Address (Including ZIP)	Rent Paid \$	Landlord Name	Phone #	Why Moving?
	Present					
From	To	Prior Complete Address (Including ZIP)	Rent Paid \$	Landlord Name	Phone #	Why Moved?
From	To	Prior Complete Address (Including ZIP)	Rent Paid \$	Landlord Name	Phone #	Why Moved?

EMPLOYMENT

From	To	Employer Name & Address	Monthly Income \$	Position	HR Fax #	Phone #	Supervisor Name
	Present						
From	To	Prior Employer Name & Address	Monthly Income \$	Position	HR Fax #	Phone #	Supervisor Name

OTHER HOUSEHOLD INCOME (Disability, Assistance, Child Support, Section 8, Etc. – You must list the name, phone number, AND fax number for each contact)

Source of Income	Complete Address (Including ZIP)	Monthly Income \$	Contact Name	Fax #	Phone #	Comments
Source of Income	Complete Address (Including ZIP)	Monthly Income \$	Contact Name	Fax #	Phone #	Comments
Source of Income	Complete Address (Including ZIP)	Monthly Income \$	Contact Name	Fax #	Phone #	Comments
Section 8	Complete Address (Including ZIP)	Vendored Amount \$	Worker Name	Fax #	Phone #	Comments

TOTAL MONTHLY HOUSEHOLD INCOME \$ _____

SOURCE OF SECURITY DEPOSIT & FIRST MONTH RENT

Source of Security Deposit (bank account, agency, self)	Account # (checking / savings)	Funds <u>Now</u> Available \$	Contact Name	Phone #	Comments
Source of First Month Rent (bank account, agency, self)	Account # (checking / savings)	Funds <u>Now</u> Available \$	Contact Name	Phone #	Comments

AUTOS

Year, Make, Model	Color	Payment \$	Paid to Whom	Phone #	Comments
Year, Make, Model	Color	Payment \$	Paid to Whom	Phone #	Comments

PERSONAL REFERENCES

Name of Father and/or Mother	Complete Address (Including ZIP)	Phone #	Comments
Personal Reference (no relatives)	Complete Address (Including ZIP)	Phone #	Comments
In Case of Emergency Contact	Complete Address (Including ZIP)	Phone #	Comments



WAIVER & RELEASE

I authorize the landlord and/or its agents to obtain all necessary information from the following entities, individuals, and organizations for the purpose of verifying and evaluating the information for my initial lease application, lease renewal, ongoing compliance with rental criteria, and/or to collect any outstanding amounts due as a result of non-compliance with a lease:

- Employer(s)
- Landlord(s)
- Banking Institutions
- Creditors and/or Mortgagees
- References
- Department of Motor Vehicles
- Educational Institutions
- Credit reporting agencies
- Criminal record search for the states of: _____
- Federal Government agencies (including but not limited to the Social Security Administration and Public Housing agencies)
- Minnesota Public Assistance agencies that sponsor programs in which I am or have been enrolled
- Other public or private housing assistance agencies to which I have applied for assistance
- Any other parties either listed on my rental application or subsequently determined to be a source or potential source of information to document or verify my income, assets, credit, residence address(es), or other information useful for evaluation of my application and/or collecting outstanding debts owed.

Information from the following tenant screening service may be used to determine the acceptance or rejection of your application: _____

I agree to indemnify and hold harmless the landlord, its authorized agents, and all parties who release information to the landlord in connection with the release, evaluation, and use of this information.

This waiver and release shall remain active and valid for as long as I lease from or have funds due to the landlord.

Signature Date

Social Security Number

Date of Birth

Page 4 of this document is a Receipt of Residential Lease Application Fee that is completed and given to the Applicant at the time of application.



Receipt of Residential Lease Application Fee

Date: _____

From: _____ \$ _____

_____ Dollars

Cash

Check

Money Order

Accepted by: _____
(Signature)