

**NORTH DAKOTA  
Rental Application**

**Please print when completing this application.**

The undersigned hereby makes applications to rent property from \_\_\_\_\_ Located in \_\_\_\_\_, North Dakota.

**LANDLORD/MANAGER**

- 1. I will be requesting a credit report.  Yes  No Fee: each applicant
- 2. Do you currently have a freeze on your credit?  Yes  No \*If yes, see below
- 3. I will be requesting a criminal background check.  Yes  No Fee: each applicant
- 4. I will be requesting a renters background check.  Yes  No Fee: each applicant
- 5. I will be requesting an income verification.  Yes  No Fee: each applicant

**TOTAL FEES: \$**

\*If you have a credit freeze, you must first notify Experian at 1-888-397-3742 to temporarily remove the freeze PRIOR to processing the application.

**APPLICANT:**

As part of the application process, I authorize the prospective landlord/manager to request the reports and check as identified and understand that the above fees are non-refundable and do not obligate the landlord to deliver possession or keys to the premises. I understand the criteria necessary to rent from the above landlord and have been provided with a copy of the terms. No contract will be established between the parties until a lease agreement has been signed by all parties.

**Applicant's signature/date:**

**Co-Applicant:**

Applicant:

Co-Applicant

- |                                                             |                                                          |                                                                                                                                                                 |
|-------------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | 1. Have you ever filed bankruptcy?                                                                                                                              |
| 2. <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | 2. Have you ever been convicted of or plead guilty or no contest to a felony?                                                                                   |
| 3. <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | 3. In the last ten years, have you been arrested, convicted of or plead guilty or no contest to a charge of possessing, dealing or manufacturing illegal drugs? |
| 4. <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | 4. Have you ever been evicted, whether or not a court proceeding was necessary to evict you?                                                                    |
| 5. <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | 5. Are you currently registered, or have you ever been required to register as a sex offender?                                                                  |
| 6. <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | 6. Do you have or plan on allowing pets in the apartment unit?                                                                                                  |

If any questions were answered Yes, please explain: \_\_\_\_\_

(Property Management Company's Name) is committed to the letter and spirit of the Fair Housing Act, which, among other things, prohibits discrimination against persons with disabilities. In accordance with our statutory responsibilities and management policies, we will make reasonable accommodations upon written request, in our rules, policies, practices, or services, when such accommodations may be necessary to afford persons with disabilities an equal opportunity to use and enjoy their housing communities.

**SECTION A - INFORMATION REGARDING APPLICANT**

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 (Last) (First) (Middle)

Present Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rent per month:\$ \_\_\_\_\_ Years There: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

Previous Street Address: \_\_\_\_\_ Years There: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rent per month:\$ \_\_\_\_\_ Landlord & Telephone: \_\_\_\_\_  
 Present Employer: \_\_\_\_\_ Years There: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Position or Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
 Employer's Address: \_\_\_\_\_  
 Previous Employer: \_\_\_\_\_ Years There: \_\_\_\_\_  
 Previous Employer's Address: \_\_\_\_\_  
 Present Net Income/Month: \$ \_\_\_\_\_ Number of Hours worked: \_\_\_\_\_ / Week \_\_\_\_\_ / Month  
 Number of occupants that will be occupying the unit: \_\_\_\_\_

**NOTE:** Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for paying this obligation.

Other income: \$ \_\_\_\_\_ per \_\_\_\_\_ . Sources of other income: \_\_\_\_\_  
Is any income listed in this section likely to be reduced in the next two years?  Yes  No If Yes, please explain: \_\_\_\_\_

Name of nearest relative not living with you: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Address: \_\_\_\_\_

**SECTION B - INFORMATION REGARDING JOINT APPLICANT  
(SPOUSE AND/OR PARENT/GUARDIAN ONLY)**

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 (Last) (First) (Middle)

Present Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rent per month: \$ \_\_\_\_\_ Years There: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

Previous Street Address: \_\_\_\_\_ Years There: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rent per month: \$ \_\_\_\_\_ Landlord & Telephone: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Years There: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position or Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Years There: \_\_\_\_\_

Previous Employer's Address: \_\_\_\_\_

Present Net Income/Month: \$ \_\_\_\_\_ Number of Hours worked: \_\_\_\_\_ / Week \_\_\_\_\_ / Month

Number of occupants that will be occupying the unit: \_\_\_\_\_

**NOTE:** Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for paying this obligation.

Other income: \$ \_\_\_\_\_ per \_\_\_\_\_ Sources of other income: \_\_\_\_\_  
 Is any income listed in this section likely to be reduced in the next two years?  Yes  No If Yes, please explain: \_\_\_\_\_

Name of nearest relative not living with you: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Relationship: \_\_\_\_\_ Address: \_\_\_\_\_

**SECTION C - PERSONAL AND/OR CREDIT REFERENCES - INCLUDE PAST AND PREVIOUS LANDLORD**

NAME	ADDRESS	PHONE NUMBER	YRS KNOWN/ RELATION- SHIP
Present Landlord 1.			
Previous Landlord 2.			
3.			
4.			
5.			

Automobile Make, Model & Year: \_\_\_\_\_ License #: \_\_\_\_\_ State: \_\_\_\_\_

Are you the co-maker and/or guarantor of any loan or contract?  Yes  No If Yes, to whom \_\_\_\_\_

Are there any unsatisfied judgments or liens against you?  Yes  No If Yes, to whom \_\_\_\_\_

Other obligations - (i.e. liability to pay alimony, child support, separate maintenance) Use separate sheet if necessary: \_\_\_\_\_

**ACKNOWLEDGEMENT AND AGREEMENT**

For purposes of renting, the undersigned acknowledges that they were informed of the rental criteria which was established per the addendum provided.

The undersigned represents that all of the above statements are true and complete and hereby authorizes management, its employees and agents to contact and obtain information from any individuals or entities that may have information regarding credit history, employment and past residential arrangements of the undersigned. The undersigned hereby indemnify and hold management, its employees and agents and all other individual or entities contracted by management harmless from all causes of action, expenses, losses, damages of any kind arising from or related to information obtained regarding credit history, employment or prior residential arrangements of the undersigned.

All persons will be treated fairly and equally without regard to race, color, religion, sex, familial status, handicap, marital status, status with respect to public assistance or national origin in compliance with the Fair Housing Act.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ Date: \_\_\_\_\_