

# Rental Application

(Fill out one application for each adult.)

DATE	APARTMENT #	UNIT SIZE	PROPERTY ADDRESS			
RENT PER MONTH		OTHER CHARGES		TOTAL RENT		
DEP. ON ACCT.	SECURITY DEP. DUE	BALANCE DUE ON ACCEPTANCE		NON-REFUNDABLE APPLICATION FEE PAID		
<b>APPLICANT (PLEASE PRINT CLEARLY)</b>						
COMPLETE LEGAL NAME, LAST/FIRST/MIDDLE				OTHER NAMES USED (MARRIED, MAIDEN, OR NICKNAMES)		
BIRTHDATE	SOCIAL SECURITY #		DRIVERS LICENSE #	E-MAIL ADDRESS		
APPLICANT'S PRESENT ADDRESS			APT. #	MOVE-IN DATE	MOVE-OUT DATE	
CITY	STATE	ZIP	HOME PHONE	PRESENT LANDLORD/MANAGER	RENT AMOUNT	PHONE
PREVIOUS ADDRESS			APT. #	MOVE-IN DATE	MOVE-OUT DATE	
CITY	STATE	ZIP	PREVIOUS LANDLORD/MANAGER		RENT AMOUNT	PHONE
<b>MONTHLY INCOME</b>						
SOURCE (EMPLOYER IF EMPLOYED)		CONTACT OR SUPERVISOR'S NAME		MONTHLY INCOME	START DATE	END DATE
ADDRESS		CITY	STATE	ZIP	PHONE	
PREVIOUS EMPLOYER, IF ANY		START DATE	END DATE	REASON FOR LEAVING		
ADDRESS		CITY	STATE	ZIP	PHONE	
<b>OTHER SOURCES OF INCOME (ASSISTANCE, PART-TIME JOB, ETC.)</b>						
SOURCE/CONTACT		AMOUNT PER MONTH		PHONE		
SOURCE/CONTACT		AMOUNT PER MONTH		PHONE		
<b>BANK REFERENCE (INDICATE BANK BRANCH AND SERVICES USED)</b>						
NAME		ACCOUNT #		<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LOAN		
ADDRESS		CITY	STATE	ZIP	PHONE	
<b>IN CASE OF EMERGENCY NOTIFY</b>						
NAME		RELATIONSHIP	PHONE	ADDRESS	CITY	STATE   ZIP
<b>MOTOR VEHICLE</b>						
LICENSE PLATE #	MAKE	YEAR	MODEL & COLOR			
<b>HAVE YOU EVER...</b>						
HAVE YOU EVER BEEN CONVICTED OF A CRIME (EXCEPT DRIVING CITATION) WITHIN THE PAST 10 YEARS?				<input type="checkbox"/> YES <input type="checkbox"/> NO		
HAVE YOU EVER BEEN EVICTED OR BEEN ASKED TO VACATE?				<input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YOU ANSWERED YES TO EITHER OF THE QUESTIONS ABOVE, PLEASE EXPLAIN:						
<b>LIST ALL OCCUPANTS OF UNIT — RELATIONSHIP/AGE</b>						
NAME	RELATIONSHIP	AGE	NAME	RELATIONSHIP	AGE	
NAME	RELATIONSHIP	AGE	NAME	RELATIONSHIP	AGE	

Is there any information that might appear on your credit, rental or criminal history that you wish to disclose and/or address up front, knowing that failure to disclose such information may be considered grounds for denial of this application?    Yes    No

Applicant understands and agrees that if he/she makes incorrect or misleading statements or omissions on this form, applicant will forfeit his/her deposit.

Applicant understands and agrees that he/she has only applied for a tenancy. This form is not a lease, but an application and offer to lease which may be accepted or rejected by Management. Other prospective residents may also have applied. If Management does not accept this application, the deposit will be refunded except as provided below. If Management notifies the applicant that the application has been accepted, applicant must enter into the tenancy applied for or the deposit will be forfeited. Management is a fair housing provider and will grant equal opportunity to all persons under the law.

TENANT SCREENING AGENCY (IF USED)	PHONE
ADDRESS	CITY   STATE   ZIP

Applicant hereby grants to Management full authorization necessary to verify the information on this form, included but not limited to check credit history, rental history, criminal history, income verification, information from public agencies and other information relevant to this application for a residential tenancy.

Applicant Signature	Date	Management/Owner Signature	Date
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Note: If MHA block letters do not appear evenly tinted on the background center of this sheet, you are signing an illegally made copy.  
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