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# RENTAL APPLICATION

4/4/2013

Agent –  
Date –

DATE \_\_\_\_\_ APARTMENT # \_\_\_\_\_ UNIT SIZE \_\_\_\_\_  
 PROPERTY ADDRESS \_\_\_\_\_  
 LEASE DATES From \_\_\_\_\_ To \_\_\_\_\_ Term \_\_\_\_\_  
 OCCUPANCY DATE \_\_\_\_\_ Rent Begins \_\_\_\_\_  
 How did you hear of this vacancy?  
 Website \_\_\_\_\_ Friend \_\_\_\_\_ Ad \_\_\_\_\_ Drive-by \_\_\_\_\_ Other \_\_\_\_\_

Rent per month \$ \_\_\_\_\_  
 Security deposit [Not less than  
 1-month's rent; Sometimes higher] \$ \_\_\_\_\_  
 Application deposit \_\_\_\_\_ - 50.00  
 Balance due on acceptance = \$ \_\_\_\_\_

**EACH APPLICANT -- PLEASE:**

- Complete a **Separate Application**
- Attach **\$50** Application Deposit and Copy of **Photo ID**

### PLEASE PRINT CLEARLY.

<b>APPLICANT</b> (Prospective Resident or Guarantor / Co-signer)		Date of Birth	Driver's License # & State	Social Security #	Dependents		
Applicant (Complete Legal Name)							
Other Applicants (Legal Names)		Attach a Separate Application Form for Each Applicant					
<b>Current Address</b>		Apt #	Home Phone	Cell Phone			
City	State	Zip Code	Move-in Date	<b>DO NOT WRITE in Blank Space Below</b> [ To Be Checked By Leasing Agent ]			
Present Landlord (OWNER, <u>not</u> caretaker)		Rent Paid	Landlord Phone				
<b>Previous Address</b>		Apt #	Move-in Date				
City	State	Zip Code	Move-out Date				
Previous Landlord (OWNER, <u>not</u> caretaker)		Rent Paid	Landlord Phone				
<b>SOURCE OF INCOME</b> (EMPLOYMENT if Employed) (Show Student Loans in "Credit References" / Not as "Income")							
Name of Current Employer or Other Source		Position	Phone (your desk, ...)				
Address		Salary / mo _____ / yr _____	Begin Date				
City	State	Zip	Supervisor's Name	Supervisor's (or HR) Phone			
During occupancy, will your monthly income equal at least three times the monthly rent? Yes _____ No _____ If "No," please understand that we might deny your application or require a qualified Co-signer and collect a higher deposit.							
Previous Employer or Other Source		Previous Position	Begin Date				
Address		Reason for Leaving	End Date				
City	State	Zip	Supervisor's Name	Supervisor's (or HR) Phone			
<b>ADDITIONAL SOURCES OF INCOME</b> (ie: PART TIME JOB, ASSISTANCE, Etc.)							
1	Source	Amount / mo _____ / yr _____	Phone				
2	Source	Amount / mo _____ / yr _____	Phone				
<b>BANK ACCOUNT</b> (Indicate BRANCH -- Indicate SERVICES USED)							
Bank Name		Account #	Phone	Savings --- <input type="checkbox"/>			
Address		City	State	Zip	Checking --- <input type="checkbox"/>		
					Loan ----- <input type="checkbox"/>		
<b>AUTO(s)</b>							
Make	Year	License Plate # & State		Model & Color			
Lender / Bank Name	Date Opened	Original Loan Amt	Current Balance	Monthly Pmt			
<b>PERSONAL REFERENCES</b>							
1		Name of Father and/or Mother of Applicant		Phone			
		Address	City	State	Zip		
2		Personal Reference (No Relatives Please)		Phone			
		Address	City	State	Zip		
3		IN CASE OF EMERGENCY PLEASE CONTACT		Phone			
		Address	City	State	Zip		
<b>CREDIT REFERENCES</b> (Credit cards, etc.) (Please Be Specific -- As part of our verification process, we will obtain a consumer credit report and compare it to the information provided on this form.)							
1	Lender / Bank Name	Type of Acct	Date Opened	Credit Limit	Current Balance	Monthly Pmt	Lender address / phone
2							
3							
<b>List ALL Occupants (Names)</b>		Relationship	Age				
		Applicant (see above)					
<b>Note:</b> Only persons shown on the Lease may occupy the Apartment. Be sure to list ALL Occupants above & include yourself.							
<b>PETS</b>		None	Yes				
Kind / Description		Age	Sex				
<b>Note:</b> PETS are NOT ALLOWED without written permission signed by the building Owner and payment of additional deposit. Some types of pets are never allowed. If you have allergies, you are applying with the understanding that pets have lived in the Apartment in the past.							

**IMPORTANT**

Are you aware of problems or 'negative' items relating to your credit or your rental history; OR Have you ever been convicted of a crime?

NO  YES  If yes, please explain on the back side of this form --->

**A \$50.00 Application Deposit must accompany this Rental Application.**

The undersigned agrees that he/she will forfeit this Application Deposit if the Application is not acceptable because of incorrect or misleading information furnished by the Applicant and contained herein. It is also agreed if for any reason the Applicant is unable or unwilling to complete the Lease applied for, this Application Deposit will Not be refunded.

It is also agreed and understood that this Application for Lease is taken subject to the approval of Management and Owner. **Subject to the conditions shown above, this Application Deposit will be refunded Only if the Application is Not accepted by the Owner.**

Please list on the back other data that may affect the acceptance of this application. The foregoing information is supplied to the Management to induce them to rent to me and is true and correct in all respects. I authorize Eric M. Lein, the Owner, to verify my past and present employment records, bank accounts, and any other records needed to process my Application. I further authorize Eric M. Lein to order credit and criminal history reports on me and to verify other information, including landlord and mortgage references. It is understood that a facsimile or photocopy of this form will also serve as authorization.

**X** SIGNATURE of Applicant [Resident or Guarantor / Co-signer] DATE