



RENTAL RESEARCH SERVICES, INC.

11300 Minnetonka Mills Road, Minnetonka, Minnesota 55305-5151
1-952-935-5700 • Toll Free 1-800-328-0333 • Fax 1-952-935-9212 • Toll Free 1-800-642-5226



APPLICATION FOR APARTMENT OCCUPANCY AGREEMENT

RENTAL RESEARCH CODE # _____ COMPLEX _____ DATE _____ DATE RETURNED _____
 AUTHORIZED CALLER _____ PHONE _____ TIME CALLED IN _____ TIME RETURNED _____
 APARTMENT ADDRESS _____ APARTMENT # _____
 DATE OF MOVE IN _____ RENT \$ _____ DEPOSIT \$ _____ PAID CASH CHECK CHECK # _____
 APPLICATION PROCESSING FEE \$ _____ PAID CASH CHECK CHECK # _____

THIS FEE IS NON-REFUNDABLE SHOULD THIS APPLICATION FOR RENTAL BE ACCEPTED OR NOT.

INSERT "N/A" FOR NON-APPLICABLE ITEMS.

UNMARRIED APPLICANTS PLEASE COMPLETE SEPARATE APPLICATIONS.

APPLICANT (PLEASE PRINT CLEARLY)	Date of Birth	Driver's License #	Social Security #	Dependents
Applicant #1 (Complete Legal Name)				
Applicant #2 (Complete Legal Name)				

Present Address	Apt. #	How Long?	Data Base	DO NOT WRITE BELOW To Be Checked By Leasing Agent
City State	Zip Code	Home Phone		
Present Landlord or Caretaker	Rent Paid	Phone		
Previous Address	Apt. #	How Long?		
City State	Zip Code	Vacate Date		
Previous Landlord or Caretaker	Rent Paid	Phone		

SOURCE OF INCOME (EMPLOYMENT IF EMPLOYED)			
For Applicant #1	Salary	Position	Phone
Address	Supervisor's Name		How Long?
Previous Employer			Phone
Address	Reason for Leaving		How Long?
For Applicant #2	Salary	Position	Phone
Address	Supervisor's Name		How Long?

ADDITIONAL SOURCES OF INCOME (i.e PART TIME JOB, ASSISTANCE, DISABILITY)		
Source	Amount	Phone

BANK ACCOUNT (INDICATE BRANCH - INDICATE SERVICES USED)			
Name	Account #	Phone	Savings <input type="checkbox"/>
Address	Zip		Checking <input type="checkbox"/>
			Loan <input type="checkbox"/>

AUTO(S)			
Make	Year	License Plate #	Model & Color
Monthly Auto Payments \$		Paid to Whom (Even if Paid in Full)	
Make	Year	License Plate #	Model & Color
Monthly Auto Payments \$		Paid to Whom (Even if Paid in Full)	

REFERENCES		PETS No <input type="checkbox"/> Yes <input type="checkbox"/> Kind	
Name of Father and/or Mother (Applicant #1)		Phone	
Address	City State	Zip	
Name of Father and/or Mother (Applicant #2)		Phone	
Address	City State	Zip	
Personal References (No Relatives Please)		Phone	
Address	City State	Zip	
IN CASE OF EMERGENCY PLEASE CONTACT		Phone	
Address	City State	Zip	

CREDIT REFERENCES (BE SPECIFIC)		
Account Name	Address	Account #
Account Name	Address	Account #

List All Occupants (Names)	Relationship	Age

The State of Minnesota prohibits discrimination in Housing, and this form has been reviewed by the Minnesota Department of Human Rights, the Minnesota Attorney General's Office and the Office of Housing and Urban Development. Application processing by Rental Research Services, Inc., 11300 Minnetonka Mills Road, Minnetonka, Minnesota 55305, (800) 328.0333. 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 whatever credit investigation the management considers appropriate. This investigation may include the exchange of information and a report from a credit reporting agency. I authorize the release of income and employment history from federal or state records including State Employment Security Agency records. This release is valid for this transaction only and continues in effect for 1 year, unless limited by state law, in which case the authorization continues in effect for the maximum period, not to exceed one year, as allowed by law.

Signature Applicant #1 _____ Date _____ Signature Applicant #2 _____ Date _____