



MINNESOTA
RESIDENT SELECTION CRITERIA (09/21/2016)

1. All adult applicants 18 or older must submit a fully completed, dated and signed, residency application and fee. Applicant must provide a government issued form of identification and must have a valid social security number. **A non-refundable \$25.00 application fee will be required for all adult applicants.**
2. Applicants must meet qualifying income guidelines.
3. Credit history and/or civil court records that contain slow pays, judgments, collections, liens or bankruptcy within the past three (3) years may be subject to rental denial. If an eviction action has ever been filed against you, regardless of the outcome, you will be denied rental.
4. Self employed applicants may be required to produce upon request two (2) years of tax returns or 1099's and non-employed individuals must provide verifiable proof of income.
5. All sources of other income must be verifiable if needed to qualify for a rental unit.
6. If you have ever been arrested or charged with a crime you may be denied rental.
7. Previous rental history reports from landlords must reflect timely payment, sufficient notice of intent to vacate, no complaints regarding noise, disturbances or illegal activities, and no damage to unit or failure to leave the property clean and without damage at time of lease termination. Any negative reference from a prior or current landlord will cause you to be denied rental.
8. No pets allowed. A non-refundable pet fee acceptable to landlord and/or an additional pet deposit or additional security deposit will be required in the case of medically necessary pets.
9. The maximum number of occupants is 2 residents per bedroom.
10. No smoking allowed inside the unit.
11. If landlord is unable to verify any information on your rental application, including but not limited to your prior rental history and your employment, you will be denied rental.
12. We may require a holding or good faith deposit to be collected to hold a property off the market. In the event the application is approved and applicant fails to enter into a lease, the applicant shall forfeit this deposit. In the event the application is approved, this deposit shall be applied to the required security deposit.
13. If you have misrepresented any information on your application, you will be denied rental.

Applicant Signature

Date



84 St. Croix Trail S. • Lakeland, MN 55043
 651.556.2222 Phone
 651.556.2229 Fax
 www.comm-mgmt.com

MINNESOTA RESIDENTIAL RENTAL APPLICATION FOR: _____

DATE: _____

(Property Address)

of Bedrooms _____

PERSONAL INFORMATION

Full Name: _____ Date of Birth: _____

First Middle Last

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Social Security #: _____ Email Address: _____

Current Home Address: _____

City State Zip: _____

Driver's License: State: _____ Number: _____

Current Marital Status? Single Married Unmarried Partner Divorced Widowed

OTHER PROPOSED OCCUPANTS (including minors)

First Name	Middle Initial	Last Name	Relationship	M/F	Social Security No.	Date of Birth

ADDRESS HISTORY (10 Years)

Include Apt. or Unit #

Current Address: _____

City: _____ State: _____ Zip: _____

Own Rent Landlord Name: _____ Landlord Phone: _____

From: _____ Monthly Rent: : _____ Reason for moving: _____

Include Apt. or Unit #

Previous Address: _____

City: _____ State: _____ Zip: _____

Own Rent Landlord Name: _____ Landlord Phone: _____

From: _____ To: _____ Monthly Rent: _____ Reason for moving: _____

EMPLOYMENT HISTORY (10 Years)

Current/Most Recent Employer From: _____ To: _____ Job Title: _____

Company: _____ Monthly Earnings: _____

Address: _____ Supervisor: _____

City: _____ State: _____ Zip: _____ Supervisor Phone: _____

Include Area Code

Previous Employer (1) From: _____ To: _____ Job Title: _____

Company: _____ Monthly Earnings: _____

Address: _____ Supervisor: _____

City: _____ State: _____ Zip: _____ Supervisor Phone: _____

Include Area Code

OTHER INCOME SOURCES

Check if applicable:

<input type="checkbox"/>	Alimony	\$	_____
<input type="checkbox"/>	Child Support	\$	_____
<input type="checkbox"/>	Social Security	\$	_____
<input type="checkbox"/>	Government Assistance	\$	_____
<input type="checkbox"/>	Other: _____	\$	_____

Office Use Only

Total Additional
Monthly Income:

REFERENCES

Personal Reference (not related)

Include Area Code

Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____ Work Phone: _____

Relationship: _____ How long? _____

Professional Reference (attorney, accountant, etc. not related)

Include Area Code

Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____ Work Phone: _____

Relationship: _____ How long? _____

GENERAL QUESTIONS

Yes No

Question

Are you a U.S. Citizen?

Do you have renter's insurance?

Do you or any other household members have or expect to have any pets? (If yes, fill out the table below)

Type of Pet (dog, cat, etc.)	Pet's Name	Pet Size (lbs & ft/in)	Pet Age	Color	Kid Friendly?

GENERAL QUESTIONS (cont'd)

		Have you ever broken a lease? If yes, explain why. _____
		Have you ever left any type of rental property still owing money? If yes, explain why and the amount owed? _____
		Have you ever been served an eviction notice? If yes, provide rental address & date of occurrence. _____
		Have you ever filed for bankruptcy? If yes, when? _____
		Have you ever been convicted of a felony? If yes, explain when and why. _____

How did you hear about us?

Explanation: _____

The undersigned understands this application will be evaluated by management for the purposes of renting and occupying valuable real estate. Applicant further understands that the facts represented herein are being relied upon by management and therefore guarantees that all disclosures are true and complete.

Any misleading, incorrect, or false statements may be a violation of various fraud statutes.

Management reserves the right to pursue applicant by any means legally available for providing misleading, incorrect, or false statements. Misleading, incorrect, or false statements will be sufficient reason for immediate eviction and loss of security deposit.

The undersigned further acknowledges and agrees that management may confirm information provided in the application and authorizes management to contact references, obtain a personal credit report, check public records, criminal records, and use any other methods of confirmation available to management. Applicant further acknowledges that management may from time to time continue to make efforts to update the information provided herein. Applicant also acknowledges that management, or its collection agency, may contact references, obtain a personal credit report, check public records, criminal records, and use any other methods of confirmation available for collection purposes should it become necessary.

In consideration of management reviewing and evaluating my application to rent, I understand that the application fee of \$25 is non-refundable. Furthermore, I understand that acceptance of the application fee, by management, in no way obligates management to approve tenancy.

Applicant's Name Printed

Applicant's Signature

Date

Application screening company: Screening Reports, Inc. - 220 Gerry Drive - Wood Dale, IL 60191

Office Use Only

Full Name: _____ Date of Birth: _____

Address: _____ SSN: _____

City State Zip: _____ Total Monthly Income: \$ _____

Approved

Rejected

Date: _____ Initials: _____



WISCONSIN

RESIDENT SELECTION CRITERIA (09/21/2016)

1. All adult applicants 18 or older must submit a fully completed, dated and signed, residency application and fee. Applicant must provide a government issued form of identification and must have a valid social security number. **A non-refundable \$20.00 application fee will be required for all adult applicants.**
2. Applicants must meet qualifying income guidelines.
3. Credit history and/or civil court records that contain slow pays, judgments, collections, liens or bankruptcy within the past three (3) years may be subject to rental denial. If an eviction action has ever been filed against you, regardless of the outcome, you will be denied rental.
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DATE: _____

(Property Address)

of Bedrooms _____

PERSONAL INFORMATION

Full Name: _____ Date of Birth: _____

First Middle Last

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Social Security #: _____ Email Address: _____

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Current Marital Status? Single Married Unmarried Partner Divorced Widowed

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Company: _____ Monthly Earnings: _____

Address: _____ Supervisor: _____

City: _____ State: _____ Zip: _____ Supervisor Phone: _____

Include Area Code

Previous Employer (1) From: _____ To: _____ Job Title: _____

Company: _____ Monthly Earnings: _____

Address: _____ Supervisor: _____

City: _____ State: _____ Zip: _____ Supervisor Phone: _____

Include Area Code

OTHER INCOME SOURCES

Check if applicable:

<input type="checkbox"/>	Alimony	\$ _____
<input type="checkbox"/>	Child Support	\$ _____
<input type="checkbox"/>	Social Security	\$ _____
<input type="checkbox"/>	Government Assistance	\$ _____
<input type="checkbox"/>	Other: _____	\$ _____

Office Use Only

Total Additional
Monthly Income:

REFERENCES

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