

# APPLICATION

## Walnut Trails Townhome Apartments

1813 Trailway Drive, Eagan, MN 55122 Office: 651-452-4038 Fax: 651-686-7258

UNIT NUMBER \_\_\_\_\_ ADVERTISING SOURCE \_\_\_\_\_ PET \_\_\_\_\_

FULL NAME \_\_\_\_\_ SS# \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ EMAIL \_\_\_\_\_

MOB PHONE \_\_\_\_\_ DAY PHONE \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MANAGEMENT COMPANY \_\_\_\_\_ MONTHLY RENT \$ \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_

DATE MOVED IN \_\_\_\_\_ DATE MOVING OUT \_\_\_\_\_

REASON FOR MOVING \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_

MANAGEMENT COMPANY \_\_\_\_\_ MONTHLY RENT \$ \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_

DATE MOVED IN \_\_\_\_\_ DATE MOVED OUT \_\_\_\_\_

REASON FOR MOVING \_\_\_\_\_

EMPLOYER \_\_\_\_\_ MONTHLY INCOME \$ \_\_\_\_\_

JOB DESCRIPTION \_\_\_\_\_ DATE STARTED \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

OTHER INCOME DESCRIPTION \_\_\_\_\_

FROM \_\_\_\_\_ MONTHLY INCOME \$ \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_

### BANKING REFERENCE

CHECKING # \_\_\_\_\_ PHONE \_\_\_\_\_

BANK & ADDRESS \_\_\_\_\_

OTHER ACCOUNT # \_\_\_\_\_ BANK & ADDRESS \_\_\_\_\_

### AUTOMOBILES

MAKE & MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ PLATE NO. \_\_\_\_\_ STATE \_\_\_\_\_

MAKE & MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ PLATE NO. \_\_\_\_\_ STATE \_\_\_\_\_

EMERGENCY CONTACT: NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

OTHER OCCUPANT: NAME & AGE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

OTHER OCCUPANT: NAME & AGE \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

HAVE YOU EVER FILED BANKRUPTCY? YES \_\_\_\_\_ NO \_\_\_\_\_ BEEN EVICTED? YES \_\_\_\_\_ NO \_\_\_\_\_ NOT PAY RENT? YES \_\_\_\_\_ NO \_\_\_\_\_

I represent that the foregoing information is true and correct and is given for the purpose of inducing Management to rent to the persons listed on the Apartment Lease and this Application. I understand that untrue statements on this form will result in denial and/or forfeiture of deposit. I authorize any rental investigation company to investigate the above information which may include: credit report, verification of employment and income, criminal record search, unlawful detainer search, rental history references and personal interviews. I authorize any reporting agencies, companies and persons listed above to release rental payment information, employment history, other income, and criminal information to Walnut Trails.

DATE \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_

\$ \_\_\_\_\_ APPLICATION FEE PAID IS **NOT REFUNDABLE**.

\$ \_\_\_\_\_ RENTAL DEPOSIT PAID. This deposit will be refunded within 7 days after denial of application. The deposit is **not refundable** after approval of this application. Upon approval, the deposit will be credited to rent.

### OFFICE USE ONLY (IDENTIFICATION)

DRIVER LICENSE NO. \_\_\_\_\_ STATE OF ISSUE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

NAME ON DRIVER LICENSE \_\_\_\_\_ VERIFIED BY: \_\_\_\_\_