



RENTAL RESEARCH SERVICES, INC.

7525 Mitchell Road, #301, Eden Prairie, Minnesota 55344-1958
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

RENTAL RESEARCH CODE # _____ COMPLEX _____ DATE SUBMITTED _____ DATE RETURNED _____

AUTHORIZED USER _____ PHONE _____ TIME SUBMITTED _____ 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. ALL APPLICANTS PLEASE COMPLETE SEPARATE APPLICATIONS.

APPLICANT (PLEASE PRINT CLEARLY) Applicant (Complete Legal Name)		Social Security #	Driver's License #	Date of Birth	Home Phone # () -
Present Address	APT #	City	State	ZIP	Number of Dependents

Present Landlord Or Caretaker Name	Rent Paid	Phone # of Present Landlord () -	Dates of Occupancy From To		
Previous Address	APT #	City	State	ZIP	Vacate Date

Previous Landlord Or Caretaker Name	Rent Paid	Phone # of Previous Landlord () -	Dates of Occupancy From To		
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SOURCE OF INCOME (EMPLOYMENT IF EMPLOYED)

Current Employer or Income Source		Phone # () -	Dates of Employment From To		
Address	City	State	ZIP	Salary	Position Supervisor's Name

Previous Employer or Income Source		Phone # () -	Dates of Employment From To		
Address	City	State	ZIP	Reason for Leaving	

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

Other Income Source Name	Address	City	State	ZIP	Amount	Source Phone # () -
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BANK ACCOUNT (INDICATE BRANCH)

Name of Bank	Phone # () -	CHECK SERVICES USED			
Address	City	State	ZIP	Checking <input type="checkbox"/>	Acct #
				Savings <input type="checkbox"/>	Acct #
				Loan <input type="checkbox"/>	Acct #

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

Name of Father and/or Mother (Applicant)		Address			City	State	ZIP	Phone () -
Personal References (No Relatives Please)		Address			City	State	ZIP	Phone () -
In Case of Emergency Please Contact		Address			City	State	ZIP	Phone () -

CREDIT REFERENCES (BE SPECIFIC)

Account Name	Address	City	State	ZIP	Account #	List All Occupants (Names)	Relationship	Date of Birth
Account Name	Address	City	State	ZIP	Account #			

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, or as allowed by law.

X

Signature Applicant

Date