



NORTH DAKOTA APARTMENT ASSOCIATION

Rental Application

Please print when completing this application.



The undersigned hereby makes applications to rent property from \_\_\_\_\_ Located in \_\_\_\_\_, North Dakota.

LANDLORD/MANAGER

- 1. I will be requesting a credit report. [ ] Yes [ ] No Fee: \_\_\_\_\_ each applicant
2. I will be requesting a criminal background check. [ ] Yes [ ] No Fee: \_\_\_\_\_ each applicant
3. I will be requesting a renters background check. [ ] Yes [ ] No Fee: \_\_\_\_\_ each applicant
4. I will be requesting an employment verification. [ ] Yes [ ] No Fee: \_\_\_\_\_ each applicant

TOTAL FEES: \$ \_\_\_\_\_

APPLICANT:

As part of the application process, I authorize the prospective landlord/manager to request the reports and check as identified and understand that the above fees are non-refundable and do not obligate the landlord to deliver possession or keys to the premises. I understand the criteria necessary to rent from the above landlord and have been provided with a copy of the terms. No contract will be established between the parties until a lease agreement has been signed by all parties.

Applicant:

Spouse

- 1. [ ] Yes [ ] No 1. Have you ever filed bankruptcy?
2. [ ] Yes [ ] No 2. Have you ever been convicted of or plead guilty or no contest to a felony?
3. [ ] Yes [ ] No 3. In the last ten years, have you been arrested, convicted of or plead guilty or no contest to a charge of possessing, dealing or manufacturing illegal drugs?
4. [ ] Yes [ ] No 4. Have you ever been evicted, whether or not a court proceeding was necessary to evict you?
5. [ ] Yes [ ] No 5. Are you currently registered, or have you ever been required to register as a sex offender?
6. [ ] Yes [ ] No 6. Do you have or plan on having pets in the apartment unit?
7. [ ] Yes [ ] No 7. Do you have a freeze on your credit? If Yes, you must notify Experian at 1-888-397-3242 to temporarily remove the freeze PRIOR to processing the application.

Applicant's signature/date: \_\_\_\_\_ Spouse: \_\_\_\_\_

Desired Move in Date: \_\_\_\_\_ If any questions were answered Yes, please explain:

(Property Management Company's Name) \_\_\_\_\_ is committed to the letter and spirit of the Fair Housing Act, which, among other things, prohibits discrimination against persons with disabilities. In accordance with our statutory responsibilities and management policies, we will make reasonable accommodations upon written request, in our rules, policies, practices, or services, when such accommodations may be necessary to afford persons with disabilities an equal opportunity to use and enjoy their housing communities.

SECTION A - INFORMATION REGARDING APPLICANTS

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
(Last) (First) (Middle)

Present Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Years There: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position or Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Present Net Income/Month: \$ \_\_\_\_\_ Number of Hours worked: \_\_\_\_ / Week \_\_\_\_ / Month \*Attach paystub

Spouses Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
(Last) (First) (Middle)

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Years There: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position or Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Present Net Income/Month: \$ \_\_\_\_\_ Number of Hours worked: \_\_\_\_ / Week \_\_\_\_ / Month \*Attach paystub

Name and Number of occupants that will be occupying the unit: \_\_\_\_\_

NOTE: Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for paying this obligation.

Other income: \$ \_\_\_\_\_ per \_\_\_\_\_, Sources of other income: \_\_\_\_\_

Is any income listed in this section likely to be reduced in the next two years? [ ] Yes [ ] No If Yes, please explain: \_\_\_\_\_



**SECTION C - PAST AND PREVIOUS LANDLORD REFERENCES**

Name of Present Landlord and/or Company: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address lived at: \_\_\_\_\_

Date Moved in: \_\_\_\_\_ Date Moved Out: \_\_\_\_\_ Rent per month: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
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Name of Previous Landlord and/or Company: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address lived at: \_\_\_\_\_

Date Moved in: \_\_\_\_\_ Date Moved Out: \_\_\_\_\_ Rent per month: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
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Name of Previous Landlord and/or Company: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address lived at: \_\_\_\_\_

Date Moved in: \_\_\_\_\_ Date Moved Out: \_\_\_\_\_ Rent per month: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**SECTION D - CREDIT OR PERSONAL REFERENCES**

	Name	Phone Number(s)	Years Known	Relationship or how known:
1.				
2.				
3.				

Name of nearest relative not living with you: \_\_\_\_\_ Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Address: \_\_\_\_\_

Automobile Make, Model & Year: \_\_\_\_\_ License #: \_\_\_\_\_ State: \_\_\_\_\_

Are you the co-maker and/or guarantor of any loan or contract?  Yes  No If Yes, to whom \_\_\_\_\_

Are there any unsatisfied judgments or liens against you?  Yes  No If Yes, to whom \_\_\_\_\_

Other obligations - (i.e. liability to pay alimony, child support, separate maintenance) Use separate sheet if necessary: \_\_\_\_\_

**ACKNOWLEDGEMENT AND AGREEMENT**

For purposes of renting, the undersigned acknowledges that they were informed of the rental criteria which was established per the addendum provided.

The undersigned represents that all of the above statements are true and complete and hereby authorizes management, its employees and agents to contact and obtain information from any individuals or entities that may have information regarding credit history, employment and past residential arrangements of the undersigned. The undersigned hereby indemnify and hold management, its employees and agents and all other individual or entities contracted by management harmless from all causes of action, expenses, losses, damages of any kind arising from or related to information obtained regarding credit history, employment or prior residential arrangements of the undersigned.

All persons will be treated fairly and equally without regard to race, color, religion, sex, familial status, handicap, marital status, status with respect to public assistance or national origin in compliance with the Fair Housing Act.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse: \_\_\_\_\_ Date: \_\_\_\_\_