



**KINGWOOD MANAGEMENT**  
 14520 61st Street Court North  
 Stillwater, Minnesota 55082  
 Office (651) 439-7812 Fax (651) 430-8430  
 www.kingwoodmanagement.com

# RENTAL APPLICATION

Date of Application \_\_\_\_\_  
 Desired Date of Occupancy \_\_\_\_\_  
 Desired Lease Length 6 months 1 year

Office Use Only  
 Desired Style (# of BR's, etc) \_\_\_\_\_  
 Property ID# \_\_\_\_\_

*Please complete all requested information on the front and back of this form. Thank you for your interest in our apartments!*

## PERSONAL INFORMATION

APPLICANT'S FULL NAME \_\_\_\_\_  
 Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

CO-APPLICANT'S FULL NAME \_\_\_\_\_  
 Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Full Names of All Other Residents:		Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## PERSONAL INFORMATION

PRESENT ADDRESS \_\_\_\_\_ Dates From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Present Landlord/Mortgage \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
 Monthly Payment \$ \_\_\_\_\_ Reason for Moving \_\_\_\_\_

PREVIOUS \_\_\_\_\_ Dates From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Present Landlord/Mortgage \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
 Monthly Payment \$ \_\_\_\_\_ Reason for Moving \_\_\_\_\_

## EMPLOYMENT INFORMATION

CURRENT EMPLOYER \_\_\_\_\_ Dates From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Position \_\_\_\_\_ Supervisor \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ Salary \$ \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_ Dates From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Position \_\_\_\_\_ Supervisor \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ Salary \$ \_\_\_\_\_

OTHER SOURCE OF INCOME \_\_\_\_\_ \$ \_\_\_\_\_

**HAVE YOU OR CO-APPLICANT EVER:**

Refused to pay rent when due?	Yes / No	Been sued for damage to rental property?	Yes / No
Been convicted of a felony?	Yes / No	Been sued for non-payment of rent?	Yes / No
Filed for bankruptcy?	Yes / No	Broken a Rental Agreement or Lease?	Yes / No
Been evicted/asked to move out?	Yes / No	If Yes, Explain _____	

**HOW DID YOU LEARN ABOUT OUR COMMUNITY?**

Newspaper _____	Current Resident _____
Driving By _____	Rental Magazine _____
Referral Service _____	Internet _____

**IN CASE OF PERSONAL EMERGENCY:**

Please Notify: _____	Relationship _____
Address _____	Home Phone _____
City, State & Zip _____	Work Phone _____

**OTHER INFORMATION**

How Many Pets Do You or Other Occupants Own? \_\_\_\_\_  
 Kind of Pet, Breed, Weight and Age \_\_\_\_\_

**Vehicle Information**

<b>Applicant</b>	<b>Co-Applicant / 2nd Vehicle</b>
Make & Model _____	Make & Model _____
Year _____	Year _____
Color _____	Color _____
Plate _____	Plate _____
Driver's License/State ID _____	Driver's License/State ID _____

Total Number of Vehicles per Household (including company vehicles) \_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF INFORMATION**

I/we authorize Rental History Reports to do a complete investigation of all information provided above. I/we have personally filled in and/or reviewed all information listed above. I/we understand failure to complete this form completely and truthfully may result in denial and/or forfeit of deposit. A complete investigation may include any or all of the following: Credit Report, Verification of Employment and Income, Criminal Record Search, Rental History References (including MHPA) and Personal Interviews with above references. I/we understand that I/we have a right to make a written request within 30-days to receive information pertaining to this report if I/we are not accepted based on information contained in the report. I/we authorize Rental History Reports to provide to the credit grantor Federal and State records of employment and income history, including State Employment Security Agency records. This authorization is for this transaction only and continues for (1) year unless limited by State law, in which case the authorization continues in effect for the maximum period, not to exceed (1) year, allowed by law.

My signature below authorizes all above listed companies to release rental payment information, job history information (including salary) and criminal record information.

Date Signed \_\_\_\_\_

\_\_\_\_\_  
 Applicant's Signature

**Office Use Only** Building \_\_\_\_\_ Unit \_\_\_\_\_ Unit Type \_\_\_\_\_  
 Rent \$ \_\_\_\_\_ Security Deposit \$ \_\_\_\_\_ Utilities Not Included \_\_\_\_\_  
 Lease Start Date \_\_\_\_\_ Lease End Date \_\_\_\_\_