



CUSTOMER ID: #7137

Griffith Properties LLP

Phone and Fax: (952) 955-1176

APPLICATION FOR RENTAL OCCUPANCY

This application must be filled out completely. Driver's License or ID required to complete application.

BUILDING ADDRESS: _____ UNIT # _____ PREFERRED MOVE IN DATE: _____			
MONTHLY RENT\$ _____		GARAGE\$ _____	
DEPOSIT AMT.\$ _____		APPLICATION FEE \$ _____ (Fee is non-refundable)	
(ONE PERSON PER APPLICATION PLEASE)			
APPLICANT LAST NAME		MAIDEN/PREFIX	FIRST
MIDDLE		PHONE	
EMAIL		MARITAL STATUS	
SOCIAL SECURITY # OR INS #	DATE OF BIRTH	DRIVERS LICENSE #	STATE ISSUED:
PRESENT ADDRESS		CITY	STATE
ZIP		UNIT #	FROM
TO	RENT \$	LANDLORD/PROPERTY NAME	PHONE NUMBER
# OF LEASEHOLDERS	REASON FOR MOVING		
PREVIOUS ADDRESS		CITY	STATE
ZIP		UNIT#	FROM
TO	RENT \$	LANDLORD/PROPERTY NAME	PHONE NUMBER
PRESENT EMPLOYER		PHONE #	POSITION
DATE HIRED		ADDRESS	PART/FULL TIME
SUPERVISOR	SALARY PER MONTH		PREVIOUS EMPLOYER
PHONE #	POSITION	DATE HIRED	ADDRESS
PART/FULL TIME	SUPERVISOR	DATE YOU LEFT	OTHER INCOME/SOURCE
PHONE #	CONTACT	AMOUNT	
Have you ever filed bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:	Have you ever been evicted or asked to move? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever refused to pay rent? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:	Do you have a legal right to be in the United States? <input type="checkbox"/> Yes, I am a US Citizen. <input type="checkbox"/> Yes, I have valid documentation from the U.S. Dept. of Immigration and Naturalization (INS) that allows me to be in the country. <input type="checkbox"/> No
<p>I authorize Multihousing Credit Control whose address is 10125 Crosstown Circle, Suite #100, Eden Prairie, MN 55344 to investigate my criminal history, residential, employment and income history, bank and credit history for the purpose of housing and/or employment. The source of the information may come from, but is not limited to: credit bureaus; banks and other depository institutions; current and former employers; federal or state records including State Employment Security Agency records; county or state criminal records as follows, or other sources as required. It is understood that a photocopy or facsimile copy of this form will serve as authorization. I understand failure to complete this form completely and truthfully may result in denial and/or forfeiture of deposit. This authorization is for this transaction only and continues in effect for one (1) year unless by state law, in which case the authorization continues in effect for the maximum period, not to exceed one (1) year, allowed by law.</p>			
Signature _____		Date _____	
<p>NOTE: PLEASE RETURN APPLICATION WITH APPLICABLE FEES TO CLIENT LISTED ABOVE.</p>			

CONTINUED ON BACK SIDE →→→



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MULTIHOUSING CREDIT CONTROL, 10125 CROSSTOWN CIRCLE #100, EDEN PRAIRIE, MN 55344
PHONE (952) 941-0552 ♦ FAX (952) 942-0582 ♦ TOLL FREE (800) 328-6205

EMERGENCY CONTACT NAME		PHONE NUMBER	RELATION TO YOU
VEHICLE INFORMATION	LICENSE #	YEAR	MAKE & MODEL
VEHICLE INFORMATION	LICENSE #	YEAR	MAKE & MODEL
AUTO LOAN BALANCES		MONTHLY PAYMENT	
CREDIT CARD BALANCES		MONTHLY PAYMENT	
ADDITIONAL OCCUPANT (MINOR CHILD)			AGE
ADDITIONAL OCCUPANT (MINOR CHILD)			AGE
ADDITIONAL OCCUPANT (MINOR CHILD)			AGE
ADDITIONAL OCCUPANT (MINOR CHILD)			AGE
NUMBER OF PETS (IF ALLOWED)	CATS	DOGS	SPAYED/NEUTERED?
DO YOU HAVE, AT THIS TIME, THE FULL AMOUNT REQUIRED TO LEASE THIS PROPERTY?			