

**Rental Application - Lakes Area Home Buyers, Inc. 651-271-1547**  
Mail to P.O. Box 8043, St. Paul, MN 55108 \* FAX: 651-389-0556



Today's date: \_\_\_\_\_  
Property address: \_\_\_\_\_  
Desired Move in Date: \_\_\_\_\_

**PLEASE NOTE: A separate application is required for each applicant over the age of 18** (excluding dependent children) who will reside at the property. This is to guarantee compliance with the state and Federal Fair Housing Acts.

NOTE: APPLICANTS WILL NOT BE APPROVED ON "A FIRST-COME, FIRST-SERVED BASIS." LANDLORD WILL ASSIST ALL PERSONS WITHOUT REGARD TO RACE, COLOR, CREED, SEX, RELIGION, NATIONAL ORIGIN, FAMILIAL STATUS, MARITAL STATUS, AGE, HANDICAP, SEXUAL PREFERENCE, ANCESTRY, OR UNFAVORABLE MILITARY DISCHARGE. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

**Please Print Clearly**

Applicant's full legal name \_\_\_\_\_ Soc Sec # \_\_\_\_\_  
How did you find out about us? Sign  : Newspaper: Press , Peach , FL Times  Friend : RentClicks.com  Other  \_\_\_\_\_  
Have you applied for residency with us before? \_\_\_\_\_ e-mail: \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_  
Drivers Lic # and state \_\_\_\_\_ Preferred Contact Method: \_\_\_\_\_

Total upfront investment? \$ \_\_\_\_\_ Rental price range: \$ \_\_\_\_\_

Please note: **For rent to own homes**, residents are responsible for minor maintenance and repairs on the property.

Are you able to handle all the minor maintenance/upkeep in the property? yes \_\_\_\_\_ no \_\_\_\_\_ Check the following items that you own:  
( ) Tool Box ( ) Mower ( ) Grass trimmer ( ) Snow shovel ( ) Hoses/Sprinklers ( ) Vacuum Cleaner ( ) Plunger  
Other \_\_\_\_\_ Appliances (if so, which ones) \_\_\_\_\_

Check all professional level skills possessed:

( ) Electrical ( ) Painting ( ) Plumbing ( ) Roofing ( ) Appliance repair ( ) Air conditioning ( ) Heating ( ) Carpentry

1. ( ) Yes ( ) No Do you own any real estate? If yes, what and where \_\_\_\_\_
2. ( ) Yes ( ) No Do you have renters insurance?
3. ( ) Yes ( ) No Do you have any water filled furniture?
4. ( ) Yes ( ) No Have you ever been evicted from any tenancy?
5. ( ) Yes ( ) No Have you ever willfully and intentionally refused to pay rent when due?
6. ( ) Yes ( ) No Do you know of anything which may interrupt your income or ability to pay rent?  
If yes, explain: \_\_\_\_\_
7. ( ) Yes ( ) No Rent is due in advance on the first business day of each month. Are you able to fulfill this requirement?
8. ( ) Yes ( ) No Have you ever filed a petition of bankruptcy? If yes, when & where? \_\_\_\_\_
9. ( ) Yes ( ) No Have you or anyone in your household ever been convicted of a felony or misdemeanor?  
If yes, explain: \_\_\_\_\_
10. ( ) Yes ( ) No Are you obligated to pay child support, alimony or separate maintenance?  
If yes, how much? \_\_\_\_\_
11. ( ) Yes ( ) No Do you plan to conduct any commercial business from the residence?  
If yes, explain: \_\_\_\_\_
12. ( ) Yes ( ) No Do you currently have utilities in your name?
13. ( ) Yes ( ) No Do you currently have phone service in your name?
14. ( ) Yes ( ) No Is there anything to prevent you from placing utilities or phone in your name?
15. ( ) Yes ( ) No Do you smoke?

**List Your Last Four Years Residence History & At Least Your Last Two Addresses**

**Current Address** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Type of property? (apartment, duplex/4-plex, townhouse, condo, mobile home, house, etc.) \_\_\_\_\_  
 How long at present address? \_\_\_\_\_ Occupancy dates \_\_\_\_\_ Why moving \_\_\_\_\_  
 Landlord or Mortgage Lender's name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Current monthly rent or mortgage payment? \_\_\_\_\_ Loan # \_\_\_\_\_  
 How many pets do you have? \_\_\_\_\_ Type? \_\_\_\_\_ Is your rent current? \_\_\_\_\_

**Former Address** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Type of property? (apartment, duplex/4-plex, townhouse, condo, mobile home, house, etc.) \_\_\_\_\_  
 How long at former address? \_\_\_\_\_ Occupancy dates \_\_\_\_\_ Why moved \_\_\_\_\_  
 Landlord or Mortgage Lender's name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Monthly payment? \_\_\_\_\_ Number of late payments? \_\_\_\_\_ Was your full security returned? \_\_\_\_\_

**Former Address** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Type of property? (apartment, duplex/4-plex, townhouse, condo, mobile home, house, etc.) \_\_\_\_\_  
 How long at former address? \_\_\_\_\_ Occupancy dates \_\_\_\_\_ Why moved \_\_\_\_\_  
 Landlord or Mortgage Lender's name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Monthly payment? \_\_\_\_\_ Number of late payments? \_\_\_\_\_ Was your full security returned? \_\_\_\_\_

**List Your Employment History For The Last Three Years**

Full time \_\_\_\_\_ Part Time (less than 32 hours) \_\_\_\_\_ Student \_\_\_\_\_ Retired \_\_\_\_\_ Self-employed \_\_\_\_\_  
**Current Employer** \_\_\_\_\_ How Long? \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Position / Job description \_\_\_\_\_ Monthly gross pay \$ \_\_\_\_\_  
 Mo take-home \_\_\_\_\_ Superior's name & position \_\_\_\_\_ Phone # \_\_\_\_\_

**Former Employer** \_\_\_\_\_ How Long? \_\_\_\_\_ Phone # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Position / Job description \_\_\_\_\_ Monthly gross pay \$ \_\_\_\_\_  
 Mo take-home \_\_\_\_\_ Superior's name & position \_\_\_\_\_ Phone # \_\_\_\_\_

**Additional Income (optional)**

If there are additional, verifiable sources of income you would like considered, please list income source (e.g., self employment, social security, benefit payments), and requested information below regarding each source. Applicant may be required to produce additional documentation or provide and sign release statements. Child support, alimony, or separate maintenance need NOT be disclosed unless you desire this additional income to be considered for qualification.

Additional source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Per: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ How long have you been receiving income from this source? \_\_\_\_\_  
 How long do you expect this income to continue? \_\_\_\_\_

Additional source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Per: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ How long have you been receiving income from this source? \_\_\_\_\_  
 How long do you expect this income to continue? \_\_\_\_\_

Is there any reason any of these sources could stop? \_\_\_\_\_

**Additional Income/ Emergency Sources**

In the event of some emergency that would prevent you from paying rent when due, is there a relative, person, or agency that could assist you with rent payments?

1<sup>st</sup> Emergency contact \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ 2<sup>nd</sup> Phone \_\_\_\_\_

2<sup>nd</sup> Emergency contact \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ 2<sup>nd</sup> Phone \_\_\_\_\_

Do you currently have a savings account, line of credit, or charge card sufficient to cover one month's rent? \_\_\_\_\_

**If accepted, the following persons will be living with me, (either full or part time)**

<u>Name</u>	<u>Occupation</u>	<u>Relationship</u>

**List All Vehicles Owned**

<u>Vehicle</u>	<u>Make/Model/Year</u>	<u>License No./State</u>
1. _____		
2. _____		
3. _____		

**List All Pets Which You Desire To Have Live On The Premises (full or part time)**

<u>Pet's Name</u>	<u>Type/Breed/Size</u>	<u>Sex/Neutered/Spayed</u>	<u>Indoor/Outdoor</u>
1. _____			
2. _____			
3. _____			

**List Bank Accounts**

<u>Bank Name</u>	<u>Account#</u>	<u>Checking/Savings</u>	<u>Balance</u>
1. _____			
2. _____			

**Credit References - Loans & Credit Cards**

What are your approximate total monthly payments? \_\_\_\_\_

<u>Name</u>	<u>Account #</u>	<u>Purpose</u>	<u>\$ Limit</u>	<u>Balance</u>	<u>Mo Payment</u>
1. _____					
2. _____					
3. _____					

**List Two Personal References**

<u>Name</u>	<u>Address</u>	<u>City/State/Zip</u>	<u>Phone #</u>
1. _____			
2. _____			

**List Two Professional References (i.e lawyers, bankers, etc)**

<u>Name</u>	<u>Address</u>	<u>City/State/Zip</u>	<u>Phone #</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____

**Please add any additional information you think will help us evaluate your application.** Attach additional information if necessary.

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**Thank You!** .... for completing an application with us. Please sign below. Note that a completed application requires submission of the following:

- \_\_\_\_\_ Photocopy of Driver’s license or other state picture ID card.
- \_\_\_\_\_ If self employed, most current Schedule C tax return and verification of current income.

**NON-BROKERAGE DISCLOSURE AND SCREENING POLICY**

Lakes Area Home Buyers, Inc. discloses that applicants will NOT be accepted on a “first come, first served” basis, and that Lakes Area Home Buyers, Inc. will screen applicants based on their qualifications and the Company’s needs. The Company’s screening criteria, as set forth in the Company’s Policy Manual, is available for inspection by appointment.

**APPLICANT’S WARRANTIES**

This application does not obligate the Landlord to execute a lease or deliver possession of a rental unit. Applicant understands that this application is subject to Landlord’s approval based primarily upon the above information provided, which information is certified true and correct. If any false statements are made, there will be sufficient grounds for termination and eviction. **APPLICANT AGREES TO PAY AN APPLICATION FEE OF \$25.**

Applicant authorizes Landlord to procure an investigative consumer report from a national credit bureau, completing a criminal background check and court records check, investigating my mode of living, obtaining other information concerning statements about me made herein, and answering any questions about Landlord’s experience with me now or in the future. Applicant also authorizes present and past Landlords and Employers, Banks, Credit References, Personal References, and any other person to release information regarding applicant's credit, rental, employment and/or criminal histories. A copy of this authorization may be accepted as an original. I understand the Landlord cooperates with the Oak Park Regional Housing Center, and by signing below I give permission to release my name and demographic information to them

APPLICANT NAME \_\_\_\_\_ Date \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(needed to pull credit report)