

APPLICATION FOR RESIDENCY



RHR Information Services, Inc.
 10505 Wayzata Boulevard, Suite 200
 Minnetonka, MN 55305
 PH (952) 545-3953 FX (952) 545-3973

SITE NAME: _____ RHR ID: _____ APPLICANT DATE: _____ TODAY'S DATE: _____
 MONTHLY RENT \$: _____ DEPOSIT \$: _____ GARAGE \$: _____ BLDG #: _____ APT #: _____ LEASE TERM: _____
 LEASE START DATE: _____ LEASE END DATE: _____ AGENT: _____ REFERRAL SOURCE: _____

	Last Name	First Name	Middle
Applicant	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Spouse	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>

	Social Security #	Birth Date	Drivers License	State
Applicant	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Spouse	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>

	Addresses	City, State & Zip	From / To	Management
Current	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	/	() -
Previous	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	/	() -
Previous	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	/	() -

	Employer / City, State	From / To	Contact /Phone #	Income
App Current	<input style="width:100%;" type="text"/>	/	() -	<input style="width:100%;" type="text"/>
App Previous	<input style="width:100%;" type="text"/>	/	() -	<input style="width:100%;" type="text"/>
Spouse Current	<input style="width:100%;" type="text"/>	/	() -	<input style="width:100%;" type="text"/>
Spouse Prev	<input style="width:100%;" type="text"/>	/	() -	<input style="width:100%;" type="text"/>

Bank Reference	Applicant's Phone #	Additional Information
Institution <input style="width:100%;" type="text"/>	Residence <input style="width:100%;" type="text"/>	Names of Occupants <input style="width:100%;" type="text"/>
Account # <input style="width:100%;" type="text"/>	Work <input style="width:100%;" type="text"/>	Pets: <input style="width:100%;" type="text"/>

	Name	Address	Phone Number
Party to Notify In Emergency	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Nearest Friend	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Parent of App.	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Parent of Spouse	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>

Have You Ever

Refused to Pay Rent When Due: Yes / No Filed for Bankruptcy: Yes / No Discharge Date: _____ Been Evicted: Yes / No
 Been Convicted of a Felony: Yes / No If Yes, Explain: _____

Signed Release

I/We authorize RHR Information Services, Inc. (RHR) and/or the above named company to do a complete investigation of all information provided within my application for residency. I/We have personally filled in and/or reviewed all information contained within the application. I/We understand failure to complete these documents 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 MPHA), Unlawful Detainer/Eviction Investigation, Identity Trace, Sex Offender Search, Terrorism Search, Check Writing History, and Personal Interviews with all provided references. 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/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 upon information contained in the report. I/We authorize RHR to produce to the credit granter Federal and State records of employment and income history, including State Employment Security Agency records. This authorization continues in effect for one (1) year unless limited by state law, in which case the authorization continues in effect for the maximum period, not to exceed one (1) year.

APPLICANT SIGNATURE	DATE
SPOUSE SIGNATURE	DATE

App. State Identification

/ / <small>BIRTH DATE</small>	_____ <small>VERIFIED BY COMPLEX</small>	NO PHOTO
_____ <small>DRIVER'S LICENSE NUMBER</small>		
_____ <small>FIRST NAME</small>	_____ <small>MIDDLE NAME</small>	

Spouse State Identification

/ / <small>BIRTH DATE</small>	_____ <small>VERIFIED BY COMPLEX</small>	NO PHOTO
_____ <small>DRIVER'S LICENSE NUMBER</small>		
_____ <small>FIRST NAME</small>	_____ <small>MIDDLE NAME</small>	