



Rental Application for Residents and Occupants

Date _____

Name of Applicant _____ Telephone _____

Drivers License # _____ Social Security # _____

Present
Address _____ City _____ State _____ Zip _____

Prior
Address _____ City _____ State _____ Zip _____

How long have you lived at present address? _____ Prior address? _____

Name of Landlord _____ Telephone# _____

How many will be living in this Unit? _____ Children? _____ NO PETS ALLOWED.

Employer: _____ Position: _____

How Long: _____ Telephone# _____

Current Income: _____

SPOUSE INFORMATION

Name _____

Social Security # _____ Drivers License # _____

Employer: _____ Position: _____

How Long: _____ Telephone# _____

BANK INFORMATION

Bank Name: _____ Telephone#: _____

Address: _____

Checking Acct # _____ Savings Acct # _____

YOUR VEHICLES

Make & Color _____ Year _____ License # _____

Make & Color _____ Year _____ License # _____

PERSONAL REFERENCES

CSNelson Properties

Name _____ Relationship _____ Telephone _____
Name _____ Relationship _____ Telephone _____

Name _____ Relationship _____ Telephone _____

OTHER INFORMATION

Have you, your spouse, or any occupant listed in this Application ever:

Been evicted or asked to move out? Yes _____ No _____

Broken a rental agreement? Yes _____ No _____

Declared Bankruptcy? Yes _____ No _____

Been Sued for Rent? Yes _____ No _____

Been Sued for Property Damage? Yes _____ No _____

Been arrested for a felony or sex-related crime that was resolved by conviction, probation, deferred adjudication, court ordered community supervision, or pretrial diversion?

Yes _____ No _____ Explain: _____

Been arrested for a felony or sex-related crime that has not been resolved by any method?

Yes _____ No _____ Explain: _____

AUTHORIZATION

I or We authorize _____ Cody and Sarah Nelson _____ to obtain reports from consumer reporting agencies before, during, and after tenancy on matters relating to a lease by the below owner to me and to verify, by all available means, the information in this application, including income history and other information reported by employer(s) to any state employment security agency. Authority to obtain work history information may be used only for this rental application. Authority to obtain work history expires 365 days from the date of this application.

Applicant's Signature _____

Spouse's Signature _____

- Name of Owner/Lesser _Cody & Sarah Nelson_____
- Property name and type of dwelling: _____
- Complete address: _____

- Beginning date of Lease contract: _____
- Total Security Deposit \$ _____
- # of Keys for Unit One Door Key, Two Garage Door Openers and One Air Cond Remote
- Total monthly rent for dwelling unit: \$ _____ for _____ Bedroom
- Rent to be deposited to _____ Townhomes Acct _____
- Monthly Rental Due Date _____ 1st day of every month _____
- Late charges due if not received on or before the 5th _____ \$50.00 _____
- Initial Late Charge \$ 50.00 and daily late charge after the 5th \$ 5.00 _____
- Return Check Charge \$ 50.00 _____
- Utilities paid by owner check all that apply) Electricity _____ Gas Water Sewer Trash Cable TV Heat All unmarked utilities are tenants responsibility.
- Tenant will be responsible for snow removal of sidewalks only.
- Tenant will not store unused vehicles in driveway or on street.
- This Property is in a TIF (Tax Increment Financing) District. All Tenants living in these units are required to forward their Tax Returns to us Annually. We are required by the State of Minnesota to have your Tax Returns on file every year.

Acknowledgment. You declare that all your statements in this lease agreement are true and complete. You authorize us to verify same through any means. If you fail to answer any question or give false information, we may reject the application, retain all application fees and deposits as liquid damages for our time and expense, and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits relating to the application or Lease Contract, the prevailing party may recover amounts allowed under applicable state law. We may at any time furnish information to consumer reporting compliance with the Lease Contract, the rules, and financial obligations.

I/We declare the foregoing information is true and correct and I/We hereby authorize you to conduct an employment and credit check and to verify references.

Applicant's Signature

Date

Co-Applicant's Signature

Date



Please return to: Cody and Sarah Nelson
PO Box 141
Sauk Centre, MN 56378

218-820-6772

CSNelson Properties