

COPY OF PHOTO ID IS REQUIRED IN ORDER TO PROCESS THIS APPLICATION

Application will not be processed if application is not complete

Each personal guarantor and each occupant 18 years old and over must submit a separate application

Rental Application

Building Name/Address/Apartment Number:						
	☐ 1 Bedroom	☐ 2 Bedroon	n □ 3	Bedroom		
	Pers	onal Informati	on			
Name: (First)		oc. Sec. #:	I	Date of Birth:		
Address:	City, State, Zip:		P	hone #:		
Email Address:		Driver's Licen	ase:	State:		
	Employme	ent/Income Vei	rification			
Current Employer:	Po	sition:	Contact	Name:		
Employer Address:				City/State/Zip:		
Phone #:	Start Date	:	_ Salary/Month: \$	3		
Current Employer: _		sition:	Contact	Name:		
Employer Address:				te/Zip:		
Phone #:	Start Date	Start Date: Salary/Month: \$		3		
	Emergency Contacts	(Shouldn't include a	nyone living in apar	rtment)		
Name:		Relation <u>:</u>	Phone:			
Address:			_ City/State/Zip: _			
Name:		Relation <u>:</u>	Phone:			
Address:			_ City/State/Zip: _			
	Vel	nicle Information	on			
Vehicle #1: Make/Mo	<u> </u>	Year/Color		License Plate #		
Vehicle #2: Make/Mo	del	Year/Color	I	License Plate #		

Other Occupants					
Name	Relationship	Age/DOB	Phone	Email Address	

		Residence F t least 3 years	•	y lency information)	
Present Address:	•	City/St	ate:	,	Zip Code:
Actual Dates:					
Landlord Name:					
Previous Address:		City/St	ate:		Zip Code:
Actual dates:					
Landlord Name:					
Are you at least 18 years of	age?	Yes	No		
Employees and agents to con regarding credit history, bank undersigned specifically auth financial institutions regarding whether prospective resident harmless Management, its encause of action, expense, loss undersigned. "All persons westatus, handicap, marital star Housing Act." This apto the premises. Any false statermination of you lease. No all parties \$40.00 Non-Refundable. Applicants Signature	king information, emporizes management, ag the status of check (s) has registered as apployees and agents sees or damages of anyill be treated fairly atus, national original polication is preliminatement on this apploacontract will be established.	nployment and p , its employees a king and savings a convicted sex and all other ind ay kind arising free and equally with an or status with hary only and doc lication may resultablished between Fee per Applica	ast resident agents account offende dividuals from or rethout reactes not old the part of	lential arrangements of its to contact and obtaints. In addition, manager. The undersigned here is or entities contacted be lated to any information egard to race, color, reto public assistance obligate Management to ection of your application in the section in	the undersigned. The information from ement will investigate reby Indemnifies and holds by Management from all on obtained regarding the eligion, sex, familial in compliance with the deliver possession or keys ion in immediate ment has been signed by
	Accepted (Met	Criteria)	Denied	l (Did not meet Criteria)
	Accepted (Met	CIICIIa)	Deniec	Did not meet Criteria	·)

Reason Denied: ______ Letter sent (Fair Credit Reporting Act): _____

Criminal History

conviction)? YESNO Have you ever been conviction)? YESNO Have you ever been on YESNO Have you ever been convicted to the conviction of the con	rdered to sign a Pre-trial onvicted of or plead guilting in a conviction)? onvicted of or plead guilting in a conviction)?	uilty or "no Contest" to I Diversion Agreement? ty or "no contest" to a noty or "no contest" to a formula to a few registered as a sex offer	a felony (whether or no	ot resulting in a
Offense	Felony or		Date	Probation
(Please Describe)	Misdemeanor	Sentence	Sentenced	Ends
Management, its' emplo offender. The undersig individuals or entities of from or related to any in without regard to race respect to public assist deliver possession or keep	ent that all of the above so byees and agents to invest need hereby indemnifies a contacted by management aformation abstained regard, color, religion, sex, fartance in compliance with eys to the premises. Any ate termination of your need by all parties.	tigate whether prospective and holds harmless manage from all causes or action arding the undersigned. "milial status, handicap, the Fair Housing Act." false statement on this a	e resident(s) has register gement, it employees and expenses, losses or dam 'All persons will be treamarital status, national 'Application does not outpellication may result in	ed as a convicted sex agents and all other nages of any kind arising ated fairly and equally origin or status with obligate Management to in rejection of your
Application Print Date		Applican	nt Signature	

City View Property Management * 4041 36th Ave S * Fargo, ND 58104 * 701-356-9500-O/701-356-5582F areas must be completed or the application will not be processed**

Rental Reference Verification and Release

Applicant: Please fill out this top portion for the rental reference and sign the release

Date:				
Company:	Attn.:			
Phone: Fax:				
We would greatly appreciate your help in verifyin by fax or phone would be greatly appreciated. Th		e following i	ndividual(s).	Your prompt reply
<u>Ap</u>	plicant Information	<u>1</u>		
Name:	Address: _			
Apartment No.:	City/State/Zip:			
	n for release of info furnish the information re		ow	
Signature:	Date:			
** Please do not fill out the bottom por	tion; we will submit it to	your curre	nt landlord	
LANDLORD: PLEASE	ANSWER THE FOLLO	OWING QU	ESTIONS	
Resident's Move In Date:	Move Out Date:			
Pay their rent on time? If no, how many times were they late?		YES	NO	
Take Proper Care of the Rental Unit and Grounds		YES	NO	
Ever have pets in the rental unit without consent of	of landlord	YES	NO	
Allowed individuals other than household membe	rs to live in the unit	YES	NO	
Did tenant or guest disturb their neighbors?		YES	NO	
Has law enforcement been in the residents unit that If yes, explain:	at you are aware of?	YES	NO	
Was proper notice given to vacate		YES	NO	
Was there unpaid rent or damage?		YES	NO	
Are you evicting the tenant		YES	NO	
Would you rent to them again?		YES	NO	
Signature:	Date:			