

316 10<sup>th</sup> St. W Dickinson, ND 58601 Ph: 701-227-3460

Fax: 701-483-0477

E-Mail: wprealty@ndsupernet.com

-Each adult (18 and older) must fill out a separate application
-Application fee is \$20/per person- Non-refundable
-Each application must accompany 2 months of verifiable income
-Applicant must provide 2 forms of Identification such as Drivers
License, Birth Certificate or Passport

## **RENTAL APPLICATION**

Unit applying for										
	Iiddle	Last	Birth	Date	Social Se	Social Security #		Driver's License #		
Any Other Names You've Used in the past			Home Phone				Cell Phone			
All Other Proposed Occupants			Birth Date Relationshi		ip to Applicant					
RENTAL/RESIDENCE HISTORY (must have a total of 5 years history)										
	Current Residence			Previous Residence			Prio	r Residence		
Street Address										
City										
State & Zip										
Last Rent Amount										
Owner/Manager & Phone Number										
Reason for Leaving										
Is/Was Rent paid in full?										
Did you give Proper notice?										
Were you asked To Move?		<b>(</b>								
Date of Residency	Fre	om/To			From/I	0		From/To		
Employment Histor	ry (Proof of Inco	ome is required)								
	Current Employm		Pr	evious Em	ployment	:	Prio	r Employment		
Employed By										
Address										
Employer's Phone										
Occupation										
Name of Supervisor										
Monthly Gross Pay										
D : 45	Fr	om/To			From/I	Го		From/To		
<b>Dates of Employment</b>										

Make	Model	Color	Yea	r	License Plate	
REFERENCES & El	•	TACTS	Normack Dalativa I	iving Electric		
Name	Doctor		Nearest Relative L	iving Eisewhe	ie	
Street Address						
City						
State, Zip						
Phone Number						
if you abandon the apar	tment for any reason the		llow your relative listed	above to remo	event we can't locate you. Furthermore, we all contents of the dwelling on your earned will be applied to any	
GENERAL INFOR	MATION					
Have you ever been serv	ved a late rent or eviction		o would be living in the	How long do you think you would be renting		
notice?  Have you ever filed for bankruptcy? If so, When?		apartment smoke?  No when would you like to a	move in?	from us?  Have you ever been convicted of a Felony?		
Trave you ever med for	bankrupicy: 11 50, vvnci	When would you like to	move m:	mave you ever been convicted of a relong.		
How many pets do you	have (list Type, Breed, a	pprox. Weight & Age * note n	ot all of our units are	pet friendly)		
Have you had any reocc	urring problems with yo	our current residents or landlor	d? If yes, please explain:			
Why are you moving fro	om your current address	?				
List any verifiable source	es and amounts of inco	me you wish to have considered	d (optional):			
Have you been a party to	o a lawsuit in the past? l	If yes, please explain why:				
We will run a credit che	ck and a criminal backg	round check. Is there anything	negative we will find th	at you want to	comment on?	
Do you have an e-mail a	ddress we can commun	icate with you at?				
How did you hear about	t us?					
		Agreement & Auth	orization Signat	<u>ure</u>		
verification of informany discrepancy or for a residential refurther understand refund even if I amin writing and according to the control of	rmation I provide a lack of information Ital through West P that there is a <u>non-</u> not approved for a mpanied by a self-	nd communication with n may result in the rejecti Plains Realty, Inc. and doc refundable fee to cover to residential rental. Any c	any and all names lon of this application of this application of constitute a rection of processing uestions regarding lope. All decisions v	isted on thi on. I unders ental or leas g my applio rejected ap vill be mad	or criminal check to be made, is application. I understand that tand that this is an application se agreement in whole or part. I ration and I am not entitled to a plications must be submitted in a 24-hour working period	
Signature:				Date:		