

APPLICATION FOR APARTMENT RENTAL
POTTERY PLACE LLC 2000 Old West Main # 301, Red Wing, MN 55066

Phone: (651)333-0131 Email: management@potteryplacedredwing.com

Today's Date _____ Date Needed _____
Applying for - Address _____ Apt _____
Initial Rent \$ _____ Security Deposit \$ _____
NON-REFUNDABLE Application Fee \$ 50.00 Email: _____

The deposit to hold the apartment will not be returned if the applicant changes his/her mind after giving us this application. If applicant is declined the application fee will not be returned and the money to hold the apartment will be returned.

INSTRUCTIONS: Please answer *all* questions below. If some do not apply to your situation, write "N/A". If you do not know the answer to certain questions (such as telephone numbers), please use the phone book or call somebody who does know the answer. When answers pertaining to the second applicant are identical to those of the first, please write "same".

APPLICANT (Please Print) Full Name _____
Work Phone _____ Home Phone _____
DOB _____ Social Security _____ Driver's License _____
Present Address _____ Apt # _____
City _____ ST _____ ZIP _____ How long? _____
Present Landlord/Caretaker _____ Phone _____ Monthly Rent _____
Former Address _____ Apt # _____
City _____ ST _____ ZIP _____ How long? _____
Former Landlord/Caretaker _____ Phone _____ Monthly Rent _____
Number of Pets Dog(s) _____ Cat(s) _____ Other(s) _____ None _____

SOURCE OF INCOME (EMPLOYER, ETC.)

Current Employer or _____ Monthly "take home" _____
Source of Income _____
Supervisor Name _____ Phone _____ How Long? _____
Former Employer or _____ Monthly "take home" _____
Source of Income _____
Supervisor Name _____ Phone _____ How Long? _____
Additional Source of Income _____ Phone _____ Monthly "take home" _____
BANK: Name _____ Checking _____
Branch _____ Savings _____
Phone _____ Acct # _____ Loan _____

AUTOMOBILE DATA

#1 Make/Model _____ Monthly Pmt _____ Owed To _____
License# _____ Year/Color _____ Phone _____ Approx # Pmts Remaining _____
#2 Make/Model _____ Monthly Pmt _____ Owed To _____
License# _____ Year/Color _____ Phone _____ Approx # Pmts Remaining _____

REFERENCES (Be Specific)

Name of Mother or Father _____ Phone _____
Address _____ City _____ ST _____ Zip _____
Personal Reference (not a relative) _____ Phone _____
Address _____ City _____ ST _____ Zip _____
EMERGENCY CONTACT _____ Phone _____
Address _____ City _____ ST _____ Zip _____

LEGAL

Have you ever been convicted of a: Gross Misdemeanor Yes _____ No _____
Felony Yes _____ No _____

List of ALL Occupants

Name _____ Relationship _____ Age _____
Name _____ Relationship _____ Age _____

The data supplied herein is submitted to induce the Owner's/Managers to rent an apartment to the undersigned and is true and correct to the best of my (our) knowledge. Permission to contact various credit, rental, and personal references is hereby given.

Applicant

Applicant