INH Properties, 175 7th Avenue South, Waite park MN 56387 Ph: (320) 258-6000 Fax: (320) 258-5270								
TO HOLD AN APARTMENT: *\$35 APP FEE / PER ADULT – <u>PAYABLE TO INH</u> *FULL DEPOSIT – <u>PAYABLE TO PROPERTY APPLYING FOR</u> *MONEY ORDER OR CHECK REQUIRED RENTAL APPLICATION								
Date Property Name & Addre	essApartment #							
	tant to provide information in <u>ALL</u> the categories. Please fill out Rental History ading landlord phone numbers, Employment Information with phone numbers							
Applicant: (full name)								
Social Security #								
Birthdate								
Home Phone # ()	Cellular Phone # ()							
Work Phone # ()	Email Address							
Present address	Apt #CityStateZip							
Name of Apartment	Length of Tenancy to							
Landlord Phone # ()	Is this an Apt. Rental or Family/Friend							
Previous address	Apt #CityStateZip							
Name of Apartment	Length of Tenancy to							
Landlord Phone # ()	Is this an Apt. Rental or Family/Friend							
Have you even been convicted of a crime (Have you ever been evicted or asked to vac								
If you answered Yes to either of these q	uestions please explain:							
Present employer	Previous employer							
Complete Address	Complete Address							
Phone # ()	Phone # ()							
Contact Person	Contact Person							
Monthly Gross Income	Monthly Gross Income							
Date of Hire	Date of Hire							
Date of Termination	Date of Termination							
Other Sources of Income (Assistance,	Part-Time Job, Etc.)							
Source/Contact	Amount/Month Phone:							

Bank Reference (indicate Bank Brance)		,		State	Phone
Personal Reference:	Name: Full Address Relationship				
Contact in case of Emergency:	Phone # Name:			Wk ()
	Full Address Relationship				
List all people who will occupy the apartment	Phone # <u>Name</u>	Home ()	Relatio) Birthdate
Vehicle Registration: M	ake/Model		Color	Plate #	
Were you referred by anyone?					-
Is there any information that might app knowing that failure to disclose such in	ear on your credit,		story that you	wish to disclose a	nd/or address up front, Yes No
(You may use the back side of this appl	lication to provide a	additional informati	on.)		
If Applicant is accepted and then fail any rent lost due to Applicant's failu			lanagement w	ill keep the depo	sit as reimbursement for
Background Check done by:					
Yardi Screening <u>www.yardi.com/yr</u>	<u>s</u> 1-800-736-84	76			
Applicant hereby grants to Managemen credit history, rental history, income ve application for a residential tenancy. N the law.	rification, criminal	record, information	n from public a	gencies and other	information relevant to this
Management/Owner	Signature			Applicant S	Signature
INH PROPERTIES, 175 7th Avenue	C	s, MN 56387 PH;	(320)258-6000		0



Leasing Office 175 7TH Avenue South Waite Park MN 56387 Phone: (320) 258-6000 Fax: (320) 258-5270

CREDIT/CRIMINAL BACKGROUND CHECK CONSENT FORM By signing this form you are allowing Rent Grow to release the criminal data maintained in those files which applies under Statues & Ordinance.

1. You have the right to be informed that **<u>INH PROPERTY MANAGEMENT</u>** is requesting Criminal Background Check to determine if you have been convicted of a Crime.

2. You have the right to be informed by **<u>INH PROPERTY MANAGEMENT</u>** of the results of a criminal background check and to obtain a copy of the results.

3. You have the right to obtain from St. Cloud Police Department / Stearns County Sheriff's Department and/or The Bureau of Criminal Apprehension, any records that forms the basis for the report obtained.

4. You have the right to challenge the accuracy and completeness of information contained in the report or record under section 13.04, sub.4.

5. You have the right to be informed by **<u>INH PROPERTY MANAGEMENT</u>** if your application for acceptance has been denied because of the results of this Background Check.

Applicant/Employee Information - PLEASE PRINT CLEARLY

Last Name	Fir	st Name	Middle Na	me					
Have you ever been known by another Name? (Maiden, Aliases)									
Date of Birth		Gender: Male	Female	Race:					
Driver's Lic. #		State:	Social Security #						
Current Address	Apt. #	City	State & Zip	_County					
Have you lived in Minnesota for at least the Past 10 Years? Yes NoPlease List Complete Address If Lived Anywhere Other Than Minnesota:									
Prior Address	Apt #	_City	State & Zip	County					
This Release shall be effective for ONE (1) year from the date signed.									
Applicant Signature			Date						
All Applicants over the age of eighteen (18) Must Fill out an individual Criminal Background Check									
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