

**Housing & Redevelopment Authority
Pequot Lakes
West Grove Townhomes
Rental Application**

Application Date _____	Time _____
I/We understand that before obtaining keys, I/we will sign a lease and pay in full the security deposit and rent for the first month. I/We also understand that I/we are responsible for making all necessary arrangements for utility services to my rental unit.	

Applicant: Full Legal Name (Last, First, Full Middle)		
Former Names: (Maiden, Short Names or Nick Names)		Date of Birth:
Driver's License#	Social Security#	
Spouse/Co-Head: Full Legal Name (Last, First, Full Middle)		
Former Names: Maiden, Short Names or Nick Names)		Date of Birth:
Driver's License#	Social Security#	
Present Address: Street, Apt #		
City, State, Zip Code:	Phone #	From-To:
Present Landlord or Apt Complex:	Phone #	Rent Paid:
Reason For Leaving:		
Former Address: Street, Apt #		
City, State, Zip Code:	Phone #	From-To:
Former Landlord or Apt Complex:	Phone #	Rent Paid:
Reason For Leaving:		
Applicant: Source of Income: (Social Security/SSI/Pension/Employment/IRA Income)		Gross Amount:
		\$
		\$
		\$
Spouse/Co-Head: Source of Income: (Soc. Sec./SSI/Pension/Employment/IRA Income)		Gross Amount:
		\$
		\$
		\$
Auto #1 Year, Make, Model, Color		License #
Payments: \$	Paid To:	
Auto #2 Year, Make, Model, Color		License #
Payments: \$	Paid To:	

Bank #1: Name, Location		
Type of Accounts: (Circle) Checking Savings Loan(s) Certificate of Deposit(s) Other _____		
Please list below other assets such as Stocks, Bonds, Money Market, Mutual Funds, Real Estate, Annuities, etc		
Other Assets:		
Bank #2: Name, Location		
Type of Accounts: (Circle) Checking Savings Loan(s) Certificate of Deposit(s) Other _____		
Please list below other assets such as Stocks, Bonds, Money Market, Mutual Funds, Real Estate, Annuities, etc		
Other Assets:		
Name of Closest Relative of Applicant:		Phone:
Address, City, State, Zip Code:		
Name of Personal Reference: (Non-Relative)		Phone:
Address, City, State, Zip Code:		
Name of Personal Reference: (Non-Relative)		Phone:
Address, City, State, Zip Code:		
Name of Person to Call in Case of an Emergency:		Phone:
Credit Reference #1: Name, Address & Account #:		
Credit Reference #2: Name, Address & Account #:		
List All Occupants:	Relation	Date of Birth:

I/We understand and agree that this application is not a lease and that it may be accepted or rejected by the Leasor.

I/We hereby authorize the Leasor to obtain all information available from organizations for the purpose of review of our credit, criminal and rental history and any other public records.

Signature of Applicant

Date

Signature of Spouse/Co-Head

Date