FOUR SEASONS 3651 Lancaster Lane, Plymouth, I	VILLA APPLI Minnesota 55441 Phon	CATION e: (763) 544-7453	Date	Page 1 of 2
Appartment #	Move-In Date		Rent _ \$	PER MONTH
Deposit _ \$	Renovation & Rerental Fee _ \$		Paid 🗌 Cash	Check
APPLICATION PROCESSING FE	E (NON-REFUNDALBE	SHOULD THIS APP	LICATION BE ACCEPTED OR	NOT) <u>\$</u>
APPLICANT (PLEASE PRINT	CLEARLY)			
Applicant No 1 (Complete Legal Name)		Date of Birth	Social Security #	Dependants
Applicant No 2 (Complete Legal Name)		Date of Birth	Social Security #	Dependants
Present Address		Apt. #	How Long?	
City		State	Zip	Home Phone
Present Landlord or Caretaker		Rent Paid	Phone	
Previous Address		Apt.#	How Long?	
Previous Landlord or Caretaker		Phone		
SOURCE OF INCOME - EMPI	LOYMENT IF EMPLO	YED		
Applicant No. 1 Employer		Salary	Position	Phone
Address		Supervisor's Name	How Long	
Previous Employer		Phone	Reason For Leaving	
Address		How Long		
Applicant No. 2 Employer		Salary	Position	Phone
Address		Supervisor's Name	How Long	
ADDITIONAL SOURCES OF	INCOME			
Source		Amount	Phone	

Amount

Year

Year

Paid To Whom (Even If Paid In Full.

Paid To Whom (Even If Paid In Full.

Phone

License Number

License Number

Make & Model
Monthly Payments

Source

AUTO(S) Make & Model

Monthly Payments

CONTINUED ON NEXT PAGE

Color

Phone

Color

Phone

FOUR SEASONS VILLA APPLICATION 3651 Lancaster Lane, Plymouth, Minnesota 55441 Phone: (763) 544-7453

REFERENCES								
Name of Father or Mother (Applicant No. 1)		Phone						
Address			City		State		Zip	
Name of Father or Mother (Applican	nt No. 2)		Phone					
Address			City		State		Zip	
EMERGENCY CONTACT								
Name			Phone					
Address			City		State		Zip	
PETS								
Pet No. 1			Туре		Breed			
Pet No. 2			Туре		Breed			
LIST ALL OCCUPANTS								
Name	Relationship	Ag	Age Name		Relationship			Age
Name	Relationship	Ag	Age Name		Relationship			Age
Name	Relationship	Ag	e	Name	Relationship			Age
Name	Relationship	Ag	e	Name		Relationship		Age
HOW DID YOU HEAR AB	OUT US							
Sign Newspaper	Internet Re	eferre	d By			Other		
ABOUT THIS DOCUMENT								
The foregoing information is supplied to the management to induce them to rent to me, and is true and correct in all respects, and I authorize manage- ment to contact any of the above and any other credit agencies, data banks, etc. for verification of all information and references. The undersigned applicant hereby deposits (listed above) for the purpose of inducing the management to hold an apartment for me. This is a non-refundable deposit except in the event the management does not accept me as a tenant. In the event I am accepted and do not move into the apartment the deposit herein shall be retained by the management as consideration for holding the apartment. In the event of management's approval of me as a resident I agree that I will sign a Lease on the standard form required by management (which I have reviewed) and to pay all rents and deposits required by management prior to occupancy. I understand that the information herein is submitted as a representation for the procurement of the apartment and recognize that if any information is discovered to be false the Lease may be voided at the option of management. If accepted, I agree to abide by all the rules of the apartment now in effect or hereafter established. THE RENOVATION & RERENTAL FEE (listed above) IS NOT REFUNDABLE FOR ANY REASON (UNLESS MANAGE- MENT DOES NOT ACCEPT ME AS A TENANT) AND IMMEDIATELY ACCRUES TO THE BENEFIT OF MANAGEMENT. This application does not create a tenancy between applicant and management.								
Applicant No. 1 Name Applicant No. 7			1 Signature			Date		
Applicant No. 2 Name Applicant No. 2 S			2 Signature			Date		

Notice and Authorization

I.______Hereby declare and certify that the information provided by me in making this application is true, correct and complete to the best of my knowledge. I understand and acknowledge that if granted residency, any misstatement or omission of fact on this application will be considered grounds for lease termination. I grant consent for all persons named in connection with this application to be contacted and further acknowledge and authorize my perspective landlord to utilize any investigative suppliers or sources it may deem necessary in determining my suitability for residency, with may include: credit report agencies, public record repositories and investigative agencies for the purpose of a criminal record repositories and investigative agencies for the purpose of a criminal records search. I also hereby indemnify Tena InfoBureau Services or any prospective landlord's against all damages, potential or otherwise, stemming from the release of any negative information contained in the requested investigative report.

I have received a copy of this Notice of Authorization.

Date:	 -	
Signature:	 	
Print Name:		

Date of Birth_____ Other Names Used:_____

(Maiden, Alias, Ect)

Address:		
City:	State:	Zip:

RENTAL APPLICATION ADDENDUM

I UNDERSTAND THAT BY PLACING THE \$300.00 DEPOSIT ON AN APARTMENT I AM ASKING FOUR SEASONS VILLA APARTMENTS TO HOLD THAT APARTMENT IN MY/OUR NAME(S).

I UNDERSTAND THIS IS A NON-REFUNDABLE FEE.

I ALSO UNDERSTAND THAT \$30.00 PER ADULT MUST BE PAID FOR EACH APPLICATION AND IS A NON-REFUNDABLE FEE.

SIGNATURE

DATE