APPLICATION ATTACHMENTS

- 2 most recent pay stubs or a letter of employment.
- Photo ID (driver's license, passport.)
- \$40 **non-refundable** application fee per adult applying (cash, check, or money order.)

WITHOUT THESE ATTACHMENTS YOUR APPLICATION CAN NOT BE PROCESSED.

Gateway Commons

2850 Northway Drive Brooklyn Center, MN 55430 Phone (763)-561-9072/ Fax (763)-561-3672

RENTAL REQUIREMENTS

 THE HOUSEHOLD MONTHLY INCOME MINONTHLY RENT OF THE APARTMENT Y 						
 EACH APPLICANT MUST HAVE A CREDIT HIGHER NO UNLAWFUL DETAINERS OR JUDGEN RENTAL PROPERTY SOME FELONIES AND/OR GROSS MISDED DENIED 	MENTS FROM ANOTHER					
I HAVE READ AND INITIALED ALL OF THE FOLLOWING REQUIREMENTS ABOVE AND I AGREE THAT THESE MAY CAUSE A DENIAL OF MY APPLICATION						
SIGNATURE	DATE					
SIGNATURE	DATE					

Gateway Commons APPLICATION

Apartment # Move	-in date			Rent \$	
Deposit \$ Paid Cash	☐ Chec	ck 🗇			
APPLICATION PROCESSING FEE (NONREFUNDABLE SHOU	JLD THIS APPLICA	TION BE ACCE	PTED OR	NOT) \$40.00	
APPLICANT (PLEASE PRINT CLEARLY)		Date of Birth	Social Se	ecurity #	
Applicant No. 1 (Complete Legal Name)				0	
Applicant No. 2 (Complete Legal Name)					
Present Address		Apt. #	Н	ow Long?	
City	State Z		Cell Phone		•.
Present Landlord or Caretaker	Rent F		Phone		
Previous Address	Apt. No.		Н	How Long?	
Previous Landlord or Caretaker				Phone	
SOURCE OF INCOME - EMPLOYMENT, IF EMPLOYED					
For Applicant No. 1	Salary	Posit	ion	Phone	
Address	Sup	Supervisor's Name		How Long?	
Previous Employer				Phone	
Address	Rea	Reason for Leaving		How Long?	
For Applicant No. 2	Salary	Salary Positio		Phone	
Address	Supervisor's Name			How Long?	
ADDITIONAL SOURCES OF INCOME (i.e. Part Time Job, Assistance	, Disability)				
Source	····	Amo	unt	Phone	
REFERENCES					
Name of Father and/or Mother (Applicant No. 1)				Phone	
Address	City		State	Zip	
Name of Father and/or Mother (Applicant No. 2)				Phone	
Address	City		State	Zip	
IN CASE OF EMERGENCY PLEASE CONTACT				Phone	
Address	City		State	Zip	

How did you learn of our apart	ment community? ☐ Sign		ewspaper		
Other					
List All Occupants (Names)	Relationship	Age	List All Occupants (Names)	Relationship	Age
and any other credit agencies, data management to hold an apartment to do not move into the apartment the resident I agree that I will sign a Leoccupancy, I understand that the infi	banks, etc. for verification of all inform for me. This is a non-refundable depos deposit herein shall be retained by ma ase on the standard form required by ormation herein is submitted as a repr option of management. If accepted, I a	nation and refo sit except in t anagement as management esentation for	nd is true and correct in all respects, and I au erences. The undersigned applicant hereby d he event the management does not accept is consideration for holding the apartment. In the (which I have reviewed) and to pay all rents the procurement of the apartment and reco- by all the rules of the apartment now in effect	leposits \$600.00 for the purpose o me as a tenant. In the event I am the event of management's approv s and deposits required by manage gnize that if any information is dis	of inducing the accepted and val of me as a ement prior to scovered to be
	Date	Signatu	re Applicant No. 1		
	Date	Signatu	re Applicant No. 2		