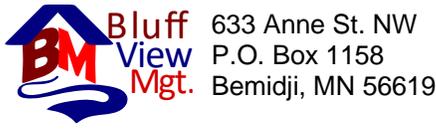


RENTAL APPLICATION

Properties managed by:



Apply online at: www.bemidjiapts.com/apply
 Email: apartments@bluffviewmgt.com
 Phone (218) 755-9500
 Fax (218) 755-9333

PERSONAL INFORMATION

Applicant Name _____ Male Female Date Today _____
First Middle Last MM / DD / YYYY

Email _____ Birthdate _____ Phone _____
MM / DD / YYYY XXX - XXX - XXXX

Social Security Number (9 digits) _____ Approx. date you are wanting to move in? _____

What size unit are you interested in? Studio 3 Bedroom 1 Bedroom 4 Bedroom / 1 Bathroom 2 Bedroom 4 Bedroom / 2 Bathroom

How many would be living in this unit? Adults _____ Children _____
 Ages of Children: _____
 Names of other adults/roommates: _____

How did you hear about us?
 Google Newspaper
 Website Friend / Acquaintance
 Facebook Sign / Driving by
 Craigslist Housing Agency _____
 Other _____

Vehicle: _____
 License Plate: _____

Depending upon your application, we may require a double deposit (same as 2 months' rent). Can you pay double deposit if required? Yes No
 Are you working with a housing subsidy program? Yes No If YES, what program/s? _____ Caseworker: _____
 Our 2-story buildings do not have elevators. Are stairs an issue for you? Yes No Phone # _____
 Do you need a handicap accessible unit? Yes No
 Do you have an animal allergy? Yes No
 Animal-friendly units (extra fees) may be available. Do you need an animal-friendly apt? Yes No Type: Cat Dog
 Do you have or anticipate the need for an ESA or service animal? Yes No Type: _____

Current Residence Information	
<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Other _____	
Address	
City, State, Zip (required)	
Dates I lived here	
Landlord/Mortgage Co.	
Their Phone Number	
Rent Amount (If Applicable)	

Employment Information	
Employer	
Position	
Employer Phone Number	
Date Hired	
Wages per Month	
Status <input type="checkbox"/> Seasonal <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time: Hrs/week _____	

Previous Residence Information	
<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Other _____	
Address	
City, State, Zip (required)	
Dates I lived here	
Landlord/Mortgage Co.	
Their Phone Number	
Rent Amount (If Applicable)	

Other Income	
Other Jobs/ Income Sources	Monthly Income
Total Monthly Income:	

School Status:
 I am not a student
 I am a student at _____
 Full Time Part Time Name of School
 Receiving Student Loans/Financial Aid? Yes No

Previous Residence Information	
<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Other _____	
Address	
City, State, Zip (required)	
Dates I lived here	
Landlord/Mortgage Co.	
Their Phone Number	
Rent Amount (If Applicable)	

FOR OFFICE USE ONLY:	
App Fee Payment \$ _____ Date: _____	<input type="checkbox"/> Cash
	<input type="checkbox"/> Check/MO
	<input type="checkbox"/> Credit/Debit Card
Verified:	
<input type="checkbox"/> Background	<input type="checkbox"/> Credit Score _____
<input type="checkbox"/> Rental History	<input type="checkbox"/> Income

BANK/CREDIT REFERENCE

(such as bank, utility company, car loan, cell phone provider, etc.)

	Bank Reference or Credit Ref	Credit Reference #2	Credit Reference #3
Name			
Phone			
City, State			

OTHER INFORMATION

Have you ever...

Been evicted? Yes No

Convicted of a crime? Yes No

Refused to pay rent? Yes No

Filed Bankruptcy? Yes No

Please explain any 'Yes' answers _____

IN CASE OF AN EMERGENCY, NOTIFY:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

By my signature below, I do hereby give authorization to Bluff View Management to make credit inquiries and verify employment, previous rental history, criminal background, and other references necessary to approve or deny this rental application. I understand that should I lease or co-sign to lease property from Bluff View Management and I fail to pay rent, fulfill the terms of the Lease Agreement, or my tenancy results in litigation, adverse credit reports may be filed with credit reporting agencies.

Name _____ Date _____