



CUSTOMER ID: #8290

LEVEL 10 MANAGEMENT LLC Phone: (612) 223-6293
APPLICATION FOR APARTMENT OCCUPANCY

This application must be filled out completely. Driver's License or ID required to complete application.

Office Use Only			
BUILDING ADDRESS: _____		APT # _____	REFERRED BY _____
LEASE DATES: FROM _____ TO _____		MOVE IN DATE: _____	LEASING AGENT _____
MONTHLY RENT\$ _____	GARAGES\$ _____	DEPOSIT DATE: _____	DEPOSIT AMT.\$ _____
APPLICATION FEE \$ _____ (Fee is non-refundable)		(ONE PERSON PER APPLICATION PLEASE)	
APPLICANT LAST NAME		MAIDEN/PREFIX	FIRST
MIDDLE			
EMAIL	CELL PHONE	EMPLOYER PHONE	
SOCIAL SECURITY # OR INS #	DATE OF BIRTH	DRIVERS LICENSE #	STATE ISSUED:
PRESENT ADDRESS		CITY	STATE
ZIP			
UNIT #	FROM	TO	RENT \$
LANDLORD/PROPERTY NAME		PHONE NUMBER	
PREVIOUS ADDRESS		CITY	STATE
ZIP			
UNIT#	FROM	TO	RENT \$
LANDLORD/PROPERTY NAME		PHONE NUMBER	
PRESENT EMPLOYER		PHONE #	POSITION
DATES			
ADDRESS		PART/FULL TIME	SUPERVISOR
SALARY			
PREVIOUS EMPLOYER		PHONE #	POSITION
DATES			
ADDRESS		PART/FULL TIME	SUPERVISOR
SALARY			
OTHER INCOME/SOURCE		PHONE #	CONTACT
AMOUNT			
ADDITIONAL OCCUPANTS		EMERGENCY CONTACT NAME & NUMBER	
VEHICLE INFORMATION		LICENSE #	YEAR
MAKE & MODEL			
Have you ever filed bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____		Have you ever been evicted or asked to move? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever refused to pay rent? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever resided in any other state? If so, where? _____		Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____	
Do you have a legal right to be in the United States? <input type="checkbox"/> Yes, I am a US Citizen. <input type="checkbox"/> Yes, I have valid documentation from the U.S. Dept. of Immigration and Naturalization (INS) that allows me to be in the country. <input type="checkbox"/> No			
I authorize Multihousing Credit Control whose address is 10125 Crosstown Circle, Suite #100, Eden Prairie, MN 55344 to investigate my criminal history, residential, employment and income history, bank and credit history for the purpose of housing and/or employment. The source of the information may come from, but is not limited to: credit bureaus; banks and other depository institutions; current and former employers; federal or state records including State Employment Security Agency records; county or state criminal records as follows, or other sources as required. It is understood that a photocopy or facsimile copy of this form will serve as authorization. I understand failure to complete this form completely and truthfully may result in denial and/or forfeiture of deposit. This authorization is for this transaction only and continues in effect for one (1) year unless by state law, in which case the authorization continues in effect for the maximum period, not to exceed one (1) year, allowed by law.			
Signature _____		Date _____	
NOTE: PLEASE RETURN APPLICATION WITH APPLICABLE FEES TO CLIENT LISTED ABOVE.			
MULTIHOUSING CREDIT CONTROL, 10125 CROSSTOWN CIRCLE #100, EDEN PRAIRIE, MN 55344 PHONE (952) 941-0552 ♦ FAX (952) 942-0582 ♦ TOLL FREE (800) 328-6205			