

Last Name

Address

First Name

City State Zip Code

Middle

DOB mm/dd/yy Phone Number

SSN

email

Drivers License

Owner Name

Phone Number Length of Lease

Prior Address

Current rent

City State Zip Code

Owner Name

Phone Number Length of Lease

Reason for leaving

Prior Address

City State Zip Code

Owner Name

Phone Number Length of Lease

Reason for leaving

Have you ever been evicted? Yes No If yes, explain.

Employment History

Present Job

Supervisor Position Wage

Phone Number Length of employment

Reason for leaving

Previous Job

Supervisor Position Wage

Phone Number Length of employment

Reason for leaving

Previous Job

Supervisor Position Wage

Phone Number Length of employment

Reason for leaving

If not currently working, what arrangements have been made to pay rent?

Bank Account #s Checking Savings

Criminal History? Yes No If yes, Please explain

Credit Judgements? Yes No If yes, Please explain

Name of nearest relative for contact in case of emergency Address Phone

Credit References

1. Phone 2. Phone

Are you on any special medications that you wish us to know about in the event of accident or injury?

Name and number of family doctor.

Property address you are interested in renting

Name all people who will reside at property

Type and size of pets

I hereby give permission for Pueringer Investments and any credit reporting agency, social service, police or government agencies to release information as requested by or from Pueringer Investments, credit agencies, rental companies or their representatives to facilitate determination as to my acceptability as a tenant or as to my credit worthiness. I also authorize Pueringer Investments to make such inquiries as they feel may be needed, and agree to hold all parties harmless as to the content of the information released. I understand that this information will be kept confidential.

Please print and sign one application per adult moving in and mail it along with a non-refundable 30.00 fee per applicant to:

Pueringer Investments
616 1/2 Front St.
Brainerd, Mn, 56401

If Sending a deposit to hold the unit please fill out the following:

Sending the sum of \$_____ as consideration for owners promise to hold said premise for occupancy by ___ adults and ___ children only. Occupancy beginning on _____ for _____, who agrees to rent said premises at \$_____ per month payable in advance. In the advent of approval of this application, this deposit shall be applied to the first months rent. If, after approval, applicant does not take possession of the held premises or sign the corresponding lease , all rights of applicant shall be terminated and the deposit shall be **forfeited** . Lease must be signed by the following date ____/____/____

Sign Here _____ Date _____