



RENTAL APPLICATION: Equal Housing Opportunity

Please complete all information requested below. Incomplete information will delay the processing of your application. PLEASE PRINT CLEARLY

*** MFSI Services is the Authorized Property Manager and represents the Owner/Landlord in this leasing process***

AUTHORIZED MANAGER OF PROPERTY TO ACCEPT SERVICE OF PROCESS; MFSI Services 607 E Center St, Rochester, MN 55904 MAILING ADDRESS: PO Box 7088, Rochester MN 55904 (507) 281-4668 Fax (507) 282-4199

For Official Use Only

Property Name: _____ U/F_ P/F_ F/F____
 Application Fee; \$35.00 None PAYABLE TO Multiple Financial Services, Inc, (MFSI)

Applicant Information

Mr. Mrs. Ms

First Name	Last Name	Middle Initial
Driver's License #	State Issued	
Date of Birth	Social Security #	
Marital Status	Email	

Current Address

Street	Apt. Number		
City	State Zip		
Home Phone	Mobile/Other Number		
Rent or Own	Current Monthly Payment	If rent, apartment name If own, mortgage company	How long have you lived here?

Employment

Current Employer	Supervisor's Name	Supervisor's Phone	
Address	City	State Zip	Work Phone
Your Position/Title	Time worked here?	Gross Monthly Income	AddiUonallIncome- child support, alimony, or other maintenance Income you want Included for qualification



Spouse Information

First Name		Last Name		Middle Initial
Date of Birth		Social Security #		
Current Employer		Supervisor's Name		Supervisor's Phone
Address	City	State	Zip	Work Phone
Your Position/rTitle	Time worked here?		Gross Monthly Income	

Your Rental/Criminal History *(You represent the answer is no by leaving any of the check boxes in this section blank)*

Have you ever been evicted? Yes No
 Have you ever been sued for property damage? Yes No
 Have you ever been sued for rent? Yes No
 Have you ever broken a lease? Yes No
 Have you ever declared bankruptcy? Yes No

Have you ever been convicted, plead guilty, no contest, received probation, deferred adjudication, court ordered supervision, or pre-trial diversion for a felony, sex related crime, or misdemeanor assault against another person?

If yes please explain: _____

Other Occupants *(list names of all persons under 18 who will occupy the unit. All occupants over 18 must complete a separate application)*

First Name	Last Name	Relationship	Date of Birth	Social Security #
First Name	Last Name	Relationship	Date of Birth	Social Security #
First Name	Last Name	Relationship	Date of Birth	Social Security#

Emergency Information *(Emergency contact person over 18 not living w/ffh you.)*

First Name	Last Name	Middle Initial	Relationship to you
Street		Apt#	
City		State	Zip
Home Phone		Other Phone	Email

Other Information

How did you first learn of this community?

Vehicle Information *(list all vehicles to be parked by you, your spouse, or other occupant)*

Year	Make/Model of Vehicle	Color	License#	State
Year	Make/Model of Vehicle	Color	License#	State



Authorization/Acknowledgement This application is made for the purpose of procuring rental of premises and for credit clearance.

By signing this application, you declare that all your statements in this application are true and complete. You authorize the community to which you are applying to verify this information through any means, including consumer reporting agencies and other rental housing owners. If you fail to answer any question or give false information, the community may reject your application, retain all application fees and deposits as liquidated damages for its time and expense, and terminate your right of occupancy.

Applicant(s) has read and understands the above statement and to the best of his/her knowledge states that all facts are true and correct. It is further understood that a credit report and complete verification will be issued by an independent agent. Any applicable application fees must be paid prior to processing of the application and are non-refundable.

If the applicant finds it necessary to cancel a move-in, the application deposit will be refunded provided the cancellation takes place within twenty-four (24) hours after submitting an application, regardless of approval status. Application fee is non-refundable.

Multiple Financial Services, Inc. utilizes a credit scoring system that incorporates a statistical model comparing information on your credit profile, such as bill-paying history, the number and type of accounts, late payments, collection actions, outstanding debt, reported rental history, and the age of accounts, to the credit performance of consumers with similar profiles. (A credit scoring model only uses information on the applicant that pertains to credit, it does not use certain characteristics like race, color, religion, sex, national origin, handicap, or familial status in its calculation.) The scoring system awards points for each factor and considers income, monthly rent, & overall credit history to evaluate how creditworthy you are. If there is limited credit history available, income and rental history will be used to evaluate your application and additional deposits may be required.

APPLICATION APPROVAL PROCESS -The approval process will begin when we have received completed applications from all applicants and occupants. The three outcomes from the approval process are accepted, conditional acceptance, or denied. Additional information and/or deposits may be required if a conditional acceptance is recommended. If you are denied credit, the Equal Credit Opportunity Act requires that the creditor give you a notice that tells you the specific reasons your application was rejected or the fact that you have the right to learn the reasons if you ask within 60 days. If a creditor says you were denied credit because you are too near your credit limits on your charge cards or you have too many credit card accounts, you may want to reapply after paying down your balances or closing some accounts. If you are denied credit because of information from a credit report, the Fair Credit Reporting Act requires the creditor to give you the name, address and phone number of the credit reporting agency that supplied the information. You should contact that agency to find out what your report said.

We do not discriminate on the basis of race, color, religion, sex, national origin, handicap, or familial status. The undersigned applicant(s) and co-signer(s) hereby consent to allow Multiple Financial Services, Inc., itself or through its designated agents and its employees, to obtain a consumer report and criminal record information, if applicable, on each of us and to obtain and verify each of our credit and employment information for the purpose of determining whether to lease an apartment to me/us. We also agree and understand that owner and its agents and employees may obtain additional consumer reports and criminal record reports, if applicable, on each of us in the future to update or review our account. Upon my/our request, owner will tell me/us whether consumer reports or criminal record reports were requested and the names and addresses of any consumer reporting agency that provided such reports.

I have read and understand the Rental Application Acknowledgement stated above. By signing this application, you declare that all your statements in this application are true and complete.

Applicant Full Name (printed)	Applicant Signature	Date
Spouse Full Name (printed)	Spouse Signature	Date

Property Management Office
607 East Center Street

PO Box 7088
Rochester, MN 55903

Date _____

CRIMINAL HISTORY CHECK

The following named individual has made application with us for residency, employment or credit.

APPLICANT INFORMATION

Full Name: _____
 First Middle Last

Maiden, Alias or Former: _____

Date of Birth _____ Sex (M or F) _____ Race _____ Soc Sec# _____

Driver's License Number _____ State _____

I hereby authorize Multiple Financial Services, Inc. to conduct a search of the Minnesota Department of Public Safety-Bureau of Criminal Apprehension website to obtain public data that includes: offense, court of conviction, date of the conviction and sentence information. The expiration of this authorization shall be for a period no longer than one year from the date of my signature. I understand that I have the right to contest the accuracy and/or completeness of the record by visiting the BCA in person at the St. Paul BCA Office or by calling 651-793-2420 for more information.

Signature of Applicant

Date: Month/Day/Year

Person Requesting Information:

Printed Name and Title

Official Signature