



Tell Us About Yourself!

Individual Credit Application

Toll Free Number: 1-800-547-5852

Fax Number: 651-487-2675

Identification:

First _____ M.I. _____ Last _____ DOB _____

Cell Number _____ Phone Number _____ Email Address _____

Social Security # _____ Driver's License # _____

Delivery Address:

Street Address _____ Apt/Unit# _____

Complex Name _____ City _____ State _____ Zip _____

Billing/Permanent Address:

Street Address _____ Apt/Unit # _____

Complex Name _____ City _____ State _____ Zip _____

Employment:

Company _____ Street Address _____

City _____ State _____ Zip _____ Phone _____

Years on Job _____ Monthly Gross Salary _____ Full Time or Part Time (circle one)

Position _____ Supervisors Name _____ Phone # _____

Reference:

Name _____ Relationship _____ Phone Number _____

Street Address _____ City _____ State _____ Zip _____

Signature/Release:

Everything I have stated on this information is correct. I understand that you will retain this sheet whether it is approved or not. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. In event my account becomes past due, I specifically authorize you to charge all amounts due to any of the major credit card I have listed. I understand that my rental lease will not become effective until your approval of my credit.

Signature _____ Date _____