

9 Thirteen, LLC

505 N. Broadway • Fargo, North Dakota • 58102

Phone: (701) 271-1551 Fax: (701) 235-5435

Qualifying Criteria: No Felons, No Sexual Offenders, No Current Misdemeanor (2yrs), Credit Score =, >650

\$35 Application Fee Due Immediately*

*per person over age 18

PERSONAL INFORMATION:

Name: (First) _____ (Middle) _____ (Last) _____
Maiden or other names you have had _____
DOB ____/____/____ Soc Sec # _____ Current Phone # _____
DL # _____ State _____ Exp _____ E-Mail: _____

List any other residents that will reside in the apartment:

Name: _____ Relation: _____
Name: _____ Relation: _____

IN AN EMERGENCY:

Notify _____ Relation: _____ Current Phone # _____

RESIDENCE HISTORY:

Present Address: _____ City/State _____ Zip Code _____
How Long: _____ Landlord/Owner _____ Phone # _____
Reason for Moving: _____

Previous Address: _____ City/State _____ Zip Code _____
How Long: _____ Landlord/Owner _____ Phone # _____
Reason for Moving: _____

EMPLOYMENT INFORMATION:

Current Employer: _____ Position: _____
How Long: _____ mo/yr Annual Salary: _____ Phone #: _____

Current Employer: _____ Position: _____
How Long: _____ mo/yr Annual Salary: _____ Phone #: _____

Have you ever been convicted of a felony? _____ yes _____ no
Do you have any pets? If so, what type and how many: _____ yes _____ no
Have you recently applied with another management company? _____ yes _____ no
Have you ever received a notice to vacate or been evicted? _____ yes _____ no
Do you owe management company money? _____ yes _____ no
Do you smoke? _____ yes _____ no

To the best of my knowledge, the information herein contained is true; any false statements will result in a denial. I understand that by signing this form, I am giving 9 Thirteen, LLC permission to verify my credit history, resident history, employment (including but not limited to hourly/salary wage, date of hire) and any other lawful reasoning required for the processing of this application.

Applicant Date

Co-Applicant Date

Rental Reference Verification and Release

Applicant: Please fill out this top portion for the rental reference and sign the release.

Previous Rental Company: _____ Attn: _____

Phone: _____ Fax: _____

We would greatly appreciate your help in verifying a rental reference for the following individual(s). Your prompt reply by fax or phone would be greatly appreciated. Thank you.

APPLICANT INFORMATION

Name (s): _____

Street Address: _____ Apt # _____

City, State, Zip: _____

Applicant's Signature _____

LANDLORD: PLEASE ANSWER THE FOLLOWING QUESTIONS:

Resident's Move in Date (month/year) _____ Move Out Date _____

Pay their rent on time? **YES NO** if no, how many times were they late _____

Take proper care of the rental unit and grounds? **YES NO**

Ever have pets in the rental home without consent of landlord? **YES NO**

Allow individuals other than household members to live in the rental home? **YES NO**

Did they or guest disturb their neighbors? **YES NO**

Has law enforcement been in the residents unit that you are aware of? **YES NO**
If yes what was the reason and what actions were taken _____

Was proper notice give to vacate? **YES NO**

Was there any unpaid rent or damages? **YES NO**

Are you evicting this tenant? **YES NO**

Would you rent again? **YES NO**

Landlord's Signature _____ Date: _____