



Po Box 2442, Maple Grove, MN 55311

Tel: 763-377-0091 Fax: 612-331-6341

www.rentuofm.com

Rental Application				
Name		Age		
Social Security Number		Drivers License #		
Birthdate		Cell Phone		
Email		Work Phone		
Current Year in School		School/Major		
How Did You Hear About Us?				
Parent/Emergency Contact Information				
Name		Relationship		Email
Work Tel		Home Tel		Cell
Current or Previous Rental Address				
Address			City, State, Zip	
Owner/Management Co & Tel				
Length of Time at Residence				
Permanent Home Address ** If you are a student please put your parent's information **				
Address			City, State, Zip	
Parent's Name			Parent's Tel	
Employment Information				
Current Employer			Contact Person	
Address			Contact Tel	
Length of Employment			Position	
Salary				
Roommate Information				
Name		Email	Cell	
Name		Email	Cell	
Name		Email	Cell	
Name		Email	Cell	
Vehicle Information				
Make/Model	Year	Color	License Plate State	License Plate #

** I verify that the information that I am releasing is current and accurate. By filling out this application, I am giving Rent UofM Property the right to inquire about my credit, employment and rental history, and to do a criminal background check and recognize that the application fee is non-refundable. I fully understand that Rent UofM Property has the right to deny my application based on a poor credit report and/or poor rental or other references.

Applicant Signature

Date

Rent UofM Property

Date