



FAX Completed Application to 952-432-5978
MULTIHOUSING CREDIT CONTROL
10125 CROSSTOWN CIRCLE, STE. #100
EDEN PRAIRIE, MINNESOTA 55344

ZITRO PROPERTY MANAGEMENT CO
15050 CEDAR AV #116, Apple Valley MN 55124
952-240-1480 (office) 952-432-5978 (fax)
CUSTOMER ID: # 7415

This application must be filled out completely. One person per application. Driver's License or ID required to complete application.

Office Use Only			
BUILDING ADDRESS: _____		APT # _____	REFERRED BY _____
LEASE DATES: FROM _____ TO _____		MOVE IN DATE: _____	LEASING AGENT _____
MONTHLY RENT\$ _____	GARAGE\$ _____	DEPOSIT DATE: _____	DEPOSIT AMT.\$ _____
APPLICATION FEE \$ _____ (Fee is non-refundable)		(ONE PERSON PER APPLICATION PLEASE)	
APPLICANT LAST NAME _____		MAIDEN/PREFIX _____	FIRST _____ MIDDLE _____
HOME PHONE _____		CELL PHONE _____	EMPLOYER PHONE _____
SOCIAL SECURITY # OR INS # _____		DATE OF BIRTH _____	DRIVERS LICENSE # _____ STATE ISSUED: _____
PRESENT ADDRESS _____		CITY _____	STATE _____ ZIP _____
UNIT # _____	FROM _____ TO _____	RENT \ PAYMENT \$ _____	LANDLORD/PROPERTY NAME _____ PHONE NUMBER _____
PREVIOUS ADDRESS _____		CITY _____	STATE _____ ZIP _____
UNIT# _____	FROM _____ TO _____	RENT \ PAYMENT \$ _____	LANDLORD/PROPERTY NAME _____ PHONE NUMBER _____
PRESENT EMPLOYER _____		PHONE # _____	POSITION _____ DATES _____
ADDRESS _____		PART/FULL TIME _____	SUPERVISOR _____ SALARY _____
PREVIOUS EMPLOYER _____		PHONE # _____	POSITION _____ DATES _____
ADDRESS _____		PART/FULL TIME _____	SUPERVISOR _____ SALARY _____
OTHER INCOME/SOURCE _____		PHONE # _____	CONTACT _____ AMOUNT _____
ADDITIONAL OCCUPANTS _____		EMERGENCY CONTACT NAME & NUMBER _____	
VEHICLE INFORMATION _____		LICENSE # _____	YEAR _____ MAKE & MODEL _____
Have you ever, or do you plan on filing for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____	Have you ever been evicted or asked to move? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever refused to pay rent? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____	Do you have a legal right to be in the United States? <input type="checkbox"/> Yes, I am a US Citizen. <input type="checkbox"/> Yes, I have valid documentation from the U.S. Dept. of Immigration and Naturalization (INS) that allows me to be in the country. <input type="checkbox"/> No
I authorize Multihousing Credit Control whose address is 10125 Crosstown Circle, Suite #100, Eden Prairie, MN 55344 to investigate my criminal history, residential, employment and income history, bank and credit history for the purpose of housing and/or employment. The source of the information may come from, but is not limited to: credit bureaus; banks and other depository institutions; current and former employers; federal or state records including State Employment Security Agency records; county or state criminal records as follows, or other sources as required. It is understood that a photocopy or facsimile copy of this form will serve as authorization. I understand failure to complete this form completely and truthfully may result in denial and/or forfeiture of deposit. This authorization is for this transaction only and continues in effect for one (1) year unless by state law, in which case the authorization continues in effect for the maximum period, not to exceed one (1) year, allowed by law.			
Signature _____		Date _____	
MULTIHOUSING CREDIT CONTROL, 10125 CROSSTOWN CIRCLE #100, EDEN PRAIRIE, MN 55344 PHONE (952) 941-0552 ♦ FAX (952) 942-0582 ♦ TOLL FREE (800) 328-6205			



FAX Completed Application to 952-432-5978
MULTIHOUSING CREDIT CONTROL
10125 CROSSTOWN CIRCLE, STE. #100
EDEN PRAIRIE, MINNESOTA 55344

ZITRO PROPERTY MANAGEMENT CO
15050 CEDAR AV #116, Apple Valley MN 55124
952-240-1480 (office) 952-432-5978 (fax)
CUSTOMER ID: # 7415

This application must be filled out completely. One person per application. Driver's License or ID required to complete application.

PAGE 2

APPLICANT LAST NAME		MAIDEN/PREFIX	FIRST	MIDDLE
EMAIL			DESIRED DATE OF OCCUPANCY	
Do you or anyone in your household smoke? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:		Do you have any pets? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list type, weight, and number:		
CHECKING ACCOUNT BALANCE _____		BANK NAME _____		
SAVINGS ACCOUNT BALANCE _____		BANK NAME _____		
RENT TO OWN APPLICANTS				
AMOUNT AVAILABLE FOR OPTION TO PURCHASE FEE _____		SOURCE OF FUNDS _____		
OTHER ASSETS (401K, IRAs, etc.) _____				
<p>I authorize Multihousing Credit Control whose address is 10125 Crosstown Circle, Suite #100, Eden Prairie, MN 55344 to investigate my criminal history, residential, employment and income history, bank and credit history for the purpose of housing and/or employment. The source of the information may come from, but is not limited to: credit bureaus; banks and other depository institutions; current and former employers; federal or state records including State Employment Security Agency records; county or state criminal records as follows, or other sources as required. It is understood that a photocopy or facsimile copy of this form will serve as authorization. I understand failure to complete this form completely and truthfully may result in denial and/or forfeiture of deposit. This authorization is for this transaction only and continues in effect for one (1) year unless by state law, in which case the authorization continues in effect for the maximum period, not to exceed one (1) year, allowed by law.</p>				
Signature _____		Date _____		
MULTIHOUSING CREDIT CONTROL, 10125 CROSSTOWN CIRCLE #100, EDEN PRAIRIE, MN 55344 PHONE (952) 941-0552 ♦ FAX (952) 942-0582 ♦ TOLL FREE (800) 328-6205				