

The Oaks of Lake George, 21202 Old Lake George Blvd. NW, Oak Grove, MN 55303

Phone: 763-753-8385, Fax: 763-753-6930

How did you hear of The Oaks of Lake George?_

APPLICANT INFORMATION

IMPORTANT: This application must be filled out completely by each individual seeking to go on the Waiting List per household. Management does not take an application fee or deposit at the time that an applicant goes on the Waiting List. Management takes the application fee and deposit at the time of applying for a specific apartment. A copy of this completed application and a copy of the application fee serves as a receipt of the non-refundable \$25.00 application fee. Please retain a copy and send your completed application to: **The Oaks of Lake George**, 21202 Old Lake George Blvd. NW, Oak Grove, MN 55303. Out of MN non-refundable application fee is \$35. Thank your

MANAGER MUST COMPLETE THIS ENTIRE SECTION								
DI III DINIO ADDEGO								
			APT.#					
	TOMOVE IN DATE:							
MONTLY RENT\$								
LAST NAME: FIRST NAME		AME:	E:		MIDDLE NAME:		HOME PHONE: CELL PHONE: WORK PHONE:	
SOCIAL SECURITY #: DATE OF BIRT		TH: DRIVERS LICENS		SE # AND STATE:		WHAT SIZE APARTMENT ARE YOU SEEKING?		
SOCIAL SECURITY #.		WIII. BRIVERS EIGEN		SE # AND STATE.		WHAT	SIZE AFARTIMENT ARE TOO SEERING!	
PRESENT ADDRESS:		CITY:		STATE:		ZIP:		
UNIT #:	: FROM: TO:		RENT \$:		LANDLORD OR COMPLEX NAME &			
PREVIOUS ADDRESS:		CITY:		STATE:		ZIP:		
UNIT#:	FROM: TO:	RENT \$:	RENT \$:		LANDLORD OR COMPLEX NAME & PHONE:			
APPLICANTS PRESENT	EMPLOYER:	PHONE #:	HONE #:		POSITION:		DATES:	
ADDRESS:		PART/FULL TIME:		SUPERVISOR:			SALARY (PLEASE PROVIDE DOCUMENTATION OF INCOME)	
OTHER MONTHLY INCOME AND AMOUNT (PLEASE PROVIDE DOCUMENTATION OF INCOME)								
OTHER MONTHLY INCOL	/IDE DOCUMENTATIO	UMENTATION OF INCOME)		APPLICANT EMAIL ADDRESS:				
VEHICLE INFORMATION: LICENSE # YEAR: MAKE & MODEL								
Have you filed bankruptcy YES / NO If yes, please explain:	asked to move? YES / NO YES / NO		HAVE YOU BEEN CONVICTED GROSS MISDEMEANOR OR FE YES / NO		DO YOU HAVE A LEGAL RIGHT TO BE IN THE UNIT Yes, I am a citizen. Yes, I have valid documentation from the U.S. Naturalization (INS) that allows me to be in the		n from the U.S. Dept. of Immigration and	
I authorize Great Lakes Management whose address is 12755 State Highway 55, Suite 125 Plymouth, MN 55441 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 / We 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								

