



Broadway Court, 4600 41st Avenue North, Robbinsdale, MN 55422

Phone: 763-537-8721, Fax: 763-537-9123

How did you hear of Broadway Court? _____

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: Broadway Court, 4600 41st Avenue North, Robbinsdale, MN 55422. Out of MN non-refundable application fee is \$35. Thank you~

MANAGER MUST COMPLETE THIS ENTIRE SECTION
BUILDING ADDRESS: _____ APT.# _____ REFERRED BY _____
LEASE DATES: FROM _____ TO _____ MOVE IN DATE: _____ LEASING AGENT _____
MONTHLY RENT\$ _____ GARAGES\$ _____ DEPOSIT DATE: _____ DEPOSIT AMT.\$ _____
LAST NAME: _____ FIRST NAME: _____ MIDDLE NAME: _____ HOME PHONE: _____
CELL PHONE: _____ WORK PHONE: _____
SOCIAL SECURITY #: _____ DATE OF BIRTH: _____ DRIVERS LICENSE # AND STATE: _____ WHAT SIZE APARTMENT ARE YOU SEEKING? _____
PRESENT ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
UNIT #: _____ FROM: _____ TO: _____ RENT \$: _____ LANDLORD OR COMPLEX NAME & PHONE: _____
PREVIOUS ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
UNIT#: _____ FROM: _____ TO: _____ RENT \$: _____ LANDLORD OR COMPLEX NAME & PHONE: _____
APPLICANTS PRESENT EMPLOYER: _____ PHONE #: _____ 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 INCOME AND AMOUNT (PLEASE PROVIDE DOCUMENTATION OF INCOME) _____ APPLICANT EMAIL ADDRESS: _____
VEHICLE INFORMATION: LICENSE # _____ YEAR: _____ MAKE & MODEL _____
Have you filed bankruptcy? YES / NO
Have you ever been evicted or asked to move? YES / NO
HAVE YOU BEEN CONVICTED OF A GROSS MISDEMEANOR OR FELONY? YES / NO
DO YOU HAVE A LEGAL RIGHT TO BE IN THE UNITED STATES?
I authorize Great Lakes Management Co whose address is 5000 Glenwood Avenue, Golden Valley, MN 55422 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 _____
GREAT LAKES MANAGEMENT CO., 5000 Glenwood Avenue, Golden Valley, MN 55422, Phone 763 - 377-1800

