Rental Policies

We are an equal opportunity housing provider. We fully comply with the Federal Fair Housing Act. We do not discriminate against any person because of race, color, religion, sex, disabilities, familial status, or national origin. We also comply with all state and local fair housing laws.

Rental Criteria.

- Income. Your monthly income must be at least three times the monthly rent. If you are self-employed, you must provide proof of a source of income. If you are receiving assistance from Section 8 or other agencies, we must know your share as well as the agencies share of the rent.
- Rental History. You must have satisfactory rental references from at least two prior landlords. If you have ever been evicted or sued for any lease violation in the past five years, we will reject your application. If you have any money due and owing to a previous or current landlord, we will reject your application. You must have a co-signer if you have rented less than one year.

Terms. All leases are 12-months in length unless specifically requested by applicant. Any lease shorter than 12-months will incur a \$25.00 monthly fee in addition to the base rent.

Occupancy guidelines. To prevent overcrowding and undue stress on plumbing and other building systems, we restrict the number of people who may reside in an apartment. In determining these restrictions, we adhere to all applicable fair housing laws. We allow 2 persons per bedroom. For the health and security of all SMOKING is NOT permitted inside the building or within 15 feet of the premises.

Application Process. We evaluate every apartment application in the following manner. You must submit a rental application form and answer all questions on the form. Any individual over 18 must submit a separate application. Each applicant must pay a \$30 application fee. We check your credit report, criminal history, and employment and rental references to confirm that they meet our rental criteria. If you meet our criteria, we will approve your application.

A security deposit payment and signed lease will remove the rental unit from the market. Until then, the unit will be advertised, marketed and leased. Tall Oak Properties will retain 100% of security deposit if applicant chooses not to rent once deposit is paid and lease is signed.



Tall Oak Properties P.O. Box 222 Watertown, MN 55388 info@talloakprop.com 952.955.1889 Fax 952-955-3218

Address of Unit applying for:	
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Rental Application

Applicant Name (First, MI, Last)				Date of Birth		Social Security Number		Drivers License #	
Current Address:					Cit	City:		State and Zip:	
									<u>-</u>
Home Phone: Cell/Alternate Phone:				none:	Reason for Moving?				
Email address:	Į.				Cu	ırrent I	Lease Terms:		
Current Landlord:			Phone:		Cι	Current Rent Amount:		How Long?	
Monthly Income In	nforma	ation: (Em			g As	ssistan			urces)
Employer Name:			Addre	SS:			City, St, Zip		
Employer Phone:	FT or Hours	PT/# of	Superv	visors' Nam	ne:	Dates of			Monthly Gross
Employer Friend.	week	-	Saper	v13013 1 (all	10.		Employment:		Income:
Previous Employe	ers' Na	me:	Addre	Address:			City, State and Zip:		
Previous		PT/# of					Dates of		Monthly Gross
Employers Phone:	Hours week	per	Super	visors Nam	ie:		Employment:		Income:
Other Income Sou	rces:	(Housing	Assista	nce, Alimo	ny,	Child S	Support, Etc.) :	*You de	o not need to include
this amount if you do not we Source:	visn for u	s to use it to	Amount per mon		nth:	th: Contact Person			Phone:
Source.			j .						
Excluding minor traffic violations, have you ever been convicted of any crime in the last 10 years? YES NO									
Explanation:									
Do you have any pets? YES NO If yes, please indicate: How many, type (dog, cat, etc), breed and weight.									
Desired Move-in D	ate:	Desir	ed Leng	gth of Occu	ıpan	ıcy:	Have you ev	er be	een evicted?
					YE	ES	NO		
Have you ever ref pay rent? YES	used No	_	, Please	e Explain:					
Are you a smoker	?	YES	N	NO					

Please list other tenants you wa	ant to live	e with vo	ou:			
Name:		Date of				Age:
Relationship:		Smok		No		
Name:		Date of	Birth:			Age:
Relationship:		Smok	er: Yes	No		
Name:		Date of	Birth:			Age:
Relationship:		Smok	er: Yes	No		
References We re	guire at l	east two	references. n	ot related	to you.	
Name:	-1 <u></u>		Phone Numb			
Address:			City:			State/Zip:
Relationship:	How lor	ng?	Type of Refer	ence	L	
I .		O ·		Personal (Circle One)	
				(
Name:			Phone Numb	er:		
Address:			City:			State/Zip:
Relationship:	How lor	ng?	Type of Refer	ence	l.	
I .		O ·		Personal (Circle One)	
				,		
Name:			Phone Numb	er:		
Address:			City:			State/Zip:
Relationship:	l How lor	ng?	Type of Refer	rence		
Relationship:	How lor	ng?	Type of Refer Business		sonal	
Relationship:	How lor	ng?			sonal	
·			Business	Pers		
Previous Rental History			Business t ten (10) years, use	Person	e, if necessar	
·			Business	Person		
Previous Rental History Previous Landlord:			Business t ten (10) years, use	Person	e, if necessar	
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Emergency Contacts:

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In case of Emergency	Contact #1					
Name:			Phone Number:			
Address:			City:		State/Zip:	
Relationship:						
In case of Emergency	Contact #2					
Name:			Phone Numbe	er:		
Address:			City:	State/Zip:		
Relationship:						
Banking Information/ F	Reference					
Name of Bank:			Phone Number:			
Account Type	Type of Account (Savings, Checking, etc.)	Account Number		Current Balance		

PROOF OF INCOME

We need to know income for the current and coming year. This includes all income from any source. Acceptable proofs of income will be:

- 1. **Social Security/SSI** Statement of Benefits from Social Security
- 2. **Retirement** (copy of check or deposit).
- 3. Interest from investments, savings, certificates, etc. (copy of statements).
- 4. Income from real estate sales or rentals (copy of payment schedule, income statement from holding company or copy of check).
- 5. Wage Earners Last 4 pay stubs
- 6. **Emergency Assistance/Section 8 or other program** Must have written letter of commitment to pay from and for the duration of the commitment directly from the authorizing agent.

I certify that all content in this application is true and correct to the very best of my knowledge.
Signature:
Today's Date:

The following pages are authorization forms that allow us to check your references and work and rental history.

We only need one authorization form per type of contact. For example, if you have only had one prior landlord, then only fill out one LANDLORD authorization form. If you have had two past employers, then we need two EMPLOYER verification forms filled out.

We need you to give us ten years of history.

If you need more forms, please print out additional copies.

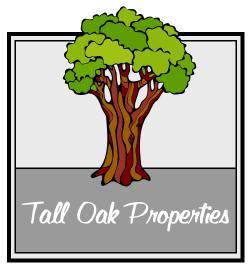
*** Be sure Include a copy of your Drivers License or state ID with your application

AUTHORIZATION FOR RELEASE OF INFORMATION

**Please fill out one of these forms for $\ensuremath{\mathsf{EACH}}$ $\ensuremath{\mathsf{COMPANY}}$ that we are contacting

I hereby authorize FINANCIAL FACILITATOR) to provide information for the purpose of determining previous	ation to TALL OAK PROPERTIES, LLC
and/or ability to pay .	
This authorization shall remain valid fo	or 90 days from the date of signature.
	Date
Social Security Number	
Printed Name	
Company Fax #	

Rental Reference Verification Form



The individual below has submitted a rental application to us. Please provide the information requested and FAX the completed form to us at 952-955-3218

"Release and Consent"		
Name of Applicant:		
Social Security Number:		
Signature of Applicant: Date:		>
Landlord / Management Co	ompany Name:	
Landlord / Management Fa	ax:	