



**Legacy Central - CO The Henderson**, 500 Sommerville Street South, Shakopee, MN 55369

Phone: 952-715-3201 | Fax: 952-322-7796

How did you hear of **Legacy Central**?\_\_ Click or tap here to enter text.

## 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. 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: Click or tap here to enter text.	FIRST NAME: Click or tap here to enter text.	MIDDLE NAME: Click or tap here to enter text.	HOME PHONE: Click or tap here to enter text. CELL PHONE: Click or tap here to enter text. WORK PHONE: Click or tap here to enter text.
SOCIAL SECURITY #: Click or tap here to enter text.	DATE OF BIRTH: Click or tap here to enter text.	DRIVERS LICENSE # AND STATE: Click or tap here to enter text.	WHAT SIZE APARTMENT ARE YOU SEEKING? Click or tap here to enter text.
PRESENT ADDRESS: Click or tap here to enter text.		CITY: Click or tap here to enter text.	STATE: Click or tap here to enter text.
UNIT #: Click or tap here to enter text.	FROM: TO: Click or tap here to enter text.	RENT \$: Click or tap here to enter text.	LANDLORD OR COMPLEX NAME & PHONE: Click or tap here to enter text.
PREVIOUS ADDRESS: Click or tap here to enter text.		CITY: Click or tap here to enter text.	STATE: Click or tap here to enter text.
UNIT#: Click or tap here to enter text.	FROM: TO: Click or tap here to enter text.	RENT \$: Click or tap here to enter text.	LANDLORD OR COMPLEX NAME & PHONE: Click or tap here to enter text.
APPLICANTS PRESENT EMPLOYER: Click or tap here to enter text.		PHONE #: Click or tap here to enter text.	POSITION: Click or tap here to enter text.
ADDRESS: Click or tap here to enter text.		PART/FULL TIME: Click or tap here to enter text.	SUPERVISOR: Click or tap here to enter text.
			SALARY (PLEASE PROVIDE DOCUMENTATION OF INCOME) Click or tap here to enter text.
OTHER MONTHLY INCOME AND AMOUNT (PLEASE PROVIDE DOCUMENTATION OF INCOME) <i>Click or tap here to enter text.</i>			
OTHER MONTHLY INCOME AND AMOUNT (PLEASE PROVIDE DOCUMENTATION OF INCOME) Click or tap here to enter text.		APPLICANT EMAIL ADDRESS: Click or tap here to enter text.	
VEHICLE INFORMATION: LICENSE # Click or tap here to enter text.		YEAR: Click or tap here to enter text.	MAKE & MODEL Click or tap here to enter text.
Have you filed bankruptcy? <input type="checkbox"/> YES / <input type="checkbox"/> NO If yes, please explain: Click or tap here to enter text.	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 BEEN CONVICTED OF A GROSS MISDEMEANOR OR FELONY? <input checked="" type="checkbox"/> YES / <input type="checkbox"/> NO	DO YOU HAVE A LEGAL RIGHT TO BE IN THE UNITED STATES? <input type="checkbox"/> Yes, I am a 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 checked="" type="checkbox"/> No
<p>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.</p> <p>Click or tap here to enter text.</p> <p>_____ Signature</p> <p>_____ Date</p>			
GREAT LAKES MANAGEMENT, 12755 State Highway 55, Suite 125 Plymouth, MN 55441, Phone 763 - 377-1800			

