



615 E Brian Street Ste F
Tea, SD 57064

Phone (605)498-8080

Fax (605)498-8081

PROPERTY APPLIED FOR: _____ Unit # _____
Desired Move in Date: _____ # of Bedrooms needed _____

Applicant Information

Name _____ Date of Birth _____
Social Security # _____ Drivers License _____
Current Address _____ Apt # _____
City _____ State _____ Zip _____
Daytime Phone # _____ Evening Phone # _____

Present Landlord _____ Landlords Phone # _____
Property Name _____ Reason for leaving _____
How Long have you lived here? _____ Rent per Month _____

Employed by _____ How Long? _____ Position _____
Supervisor / Manager _____ Phone # _____
Employment Address _____ Salary\$ _____

Spouse/Roommate Information

Name _____ Date of Birth _____
Social Security # _____ Drivers License _____
Current Address _____ Apt # _____
City _____ State _____ Zip _____
Daytime Phone # _____ Evening Phone # _____

Present Landlord _____ Landlords Phone # _____
Property Name _____ Reason for leaving _____
How Long have you lived here? _____ Rent per Month _____

Employed by _____ How Long? _____ Position _____
Supervisor / Manager _____ Phone # _____
Employment Address _____ Salary\$ _____

Other Occupants Residing With You:

Name _____ Social Security # _____ Date of Birth _____
Name _____ Social Security # _____ Date of Birth _____
Name _____ Social Security # _____ Date of Birth _____

Other References:

Name _____ Relationship _____ Phone # _____
Name _____ Relationship _____ Phone # _____

Vehicle Information (please list all vehicles to be parked on premises)

Car Make _____ Model _____ Color _____ Year _____ License # _____
Car Make _____ Model _____ Color _____ Year _____ License # _____

Emergency Contact (please list someone in the immediate area if possible)

Name _____ Address _____ Phone # _____

- | | | |
|---|-----|----|
| 1. Do you own a pet? | Yes | No |
| 2. Do you own a waterbed? | Yes | No |
| 3. Do you have renters insurance? | Yes | No |
| 4. Have you ever filed bankruptcy? | Yes | No |
| 5. Have you ever been convicted of a misdemeanor or felony? | Yes | No |

If yes, please explain: _____

- | | | |
|---|-----|----|
| 6. Has any applicant ever been served an eviction from a residence? | Yes | No |
|---|-----|----|

If yes, please explain: _____

Signature Clause

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for residency, as may be necessary. I understand that any misrepresentation may result in the denial of my application. I authorize Innovative Property Management, LLC, its subsidiaries, and its agents to investigate my rental and employment history as well as my criminal background and credit worthiness through any credit bureau or other reasonable means. I also understand that a **non-refundable application fee of \$35.00 per unit** (18 and older) is required to process my application.

THIS APPLICATION IS NOT A RENTAL AGREEMENT, CONTRACT OR LEASE. ALL APPLICATIONS ARE SUBJECT TO THE APPROVAL OF THE OWNER OR MANAGING AGENT

_____ I understand that the security deposit paid will be forfeited if I (we) do not move in and do not give written notice of such action within **twenty four (24) hours** of the date this application is signed and the security deposit is given. If such notice is given a **\$75.00 processing fee** will be deducted from the security deposit.

It is our aim to ensure that this property is a drug-free zone. Any illegal activity, including the use and sale of controlled substances, will not be tolerated. By signing this application form, I verify my support for this policy.

ALL PERSONS AT LEAST 18 YEARS OF AGE MUST SIGN BELOW.

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

We encourage and support the nation's and state's affirmative housing program in which there are no barriers to obtain housing because of race, color, sex, national origin, handicap, familial status or creed. *Equal Housing Opportunity*