



**Mills Property Office Use Only:**  
 Apply Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Copy of Applicant ID Received

# APPLICATION FOR RIVER'S EDGE

**Each Adult Applicant must submit a copy of a government issued photo ID.**

**FAMILY SUMMARY** (List all person, including yourself, who will be living within the unit)

Name	Relationship	Gender (Mark N/A if choose not to disclose)	Social Security #	Birth Date	U.S. Citizen (Yes/No)
1.	Head of Household				
2.					
3.					
4.					
5.					
6.					

Do you expect any changes to the household?  Yes  No If yes, explain: \_\_\_\_\_

**Contact Information:**

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

**Current Address** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Present Landlord (If applicable) \_\_\_\_\_ Landlord Phone # \_\_\_\_\_

Length of Occupancy: From \_\_\_\_\_ to \_\_\_\_\_

**Previous Address** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Previous Landlord (If applicable) \_\_\_\_\_ Landlord Phone # \_\_\_\_\_

Length of Occupancy: From \_\_\_\_\_ to \_\_\_\_\_

**Criminal Activity:** (River's Edge is a part of the South Dakota Crime Free Housing)

1. Have you been involved with any of the following crimes: Violence, firearm violations, illegal drugs, theft, vandalism, disorderly conduct, disturbing the peace, assaults, or stalking (do not include minor traffic violations)?

Yes  No If yes, explain: \_\_\_\_\_

2. Are you convicted sex offender?  Yes  No

**Housing Preferences:**

1. What is your desired move-in date? \_\_\_\_\_

2. What is your preferred rental size:  1 bedroom  2 bedroom  3 bedroom

3. Do you have pets?  Yes  No

4. Have you ever broken a rental agreement?  Yes  No

5. How did you hear about Mills Property Management?  Friend  Radio  Web  Newspaper  Property Sign  Other

**\*All Properties are smoke-free**

**Income Information:**

All sources of regularly received monies must be listed. Does anyone within the household receive income from the following?

Employment (wages, salaries, tips, commission, bonuses) (Please provide <b>6</b> current/consecutive paystubs reflecting your gross income)	YES <input type="checkbox"/> NO <input type="checkbox"/>
Self-Employment or Gig Income ( <b>If yes, attach most current tax return &amp; schedule C</b> )	YES <input type="checkbox"/> NO <input type="checkbox"/>
Unemployment Compensation / Workers' Compensation ( <b>attach award letter</b> )	YES <input type="checkbox"/> NO <input type="checkbox"/>
Cash contributions or gifts (including rent or utility payments) received on an ongoing basis from persons not living with you	YES <input type="checkbox"/> NO <input type="checkbox"/>
Court Ordered Alimony / Spousal Support Payments ( <b>attach divorce decree</b> )	YES <input type="checkbox"/> NO <input type="checkbox"/>
Court Ordered Child Support State _____ County _____	YES <input type="checkbox"/> NO <input type="checkbox"/>
Temporary Assistance for Needy Families (TANF)	YES <input type="checkbox"/> NO <input type="checkbox"/>
Social Security Retirement Benefits ( <b>please provide a current benefits letter</b> )	YES <input type="checkbox"/> NO <input type="checkbox"/>
Supplemental Security Income (SSI) ( <b>please provide a current benefits letter</b> )	YES <input type="checkbox"/> NO <input type="checkbox"/>
Social Security Disability Income (SSDI) ( <b>please provide a current benefits letter</b> )	YES <input type="checkbox"/> NO <input type="checkbox"/>
Optional State Supplement (\$15 per month)	YES <input type="checkbox"/> NO <input type="checkbox"/>
Veterans Benefits / Military Pay	YES <input type="checkbox"/> NO <input type="checkbox"/>
Pension or Retirement Funds (Railroad, etc.)	YES <input type="checkbox"/> NO <input type="checkbox"/>
Annuities	YES <input type="checkbox"/> NO <input type="checkbox"/>
Required minimum distribution (RMD) off of your retirement accounts	YES <input type="checkbox"/> NO <input type="checkbox"/>
Other income not listed above? Description:	YES <input type="checkbox"/> NO <input type="checkbox"/>

**If Yes to any of the above questions, please provide the following information**

Family Member Name	Income/Name Source	City/State	Monthly Gross Amount \$

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(My above signature gives my consent to any verification of information of the references I have listed including credit, criminal & landlord checks.)*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(My above signature gives my consent to any verification of information of the references I have listed including credit, criminal & landlord checks.)*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(My above signature gives my consent to any verification of information of the references I have listed including credit, criminal & landlord checks.)*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(My above signature gives my consent to any verification of information of the references I have listed including credit, criminal & landlord checks.)*

This is a preliminary application and conveys no leasing or rental rights. Additional information may be requested as necessary to complete this application process. Any signatures are my consent to any verification of information from the references I have listed including credit, criminal and landlord checks.

All agents of Mills Property Management Inc. represent the owner in this and any other transaction.  
Elena McKeown, a licensed responsible broker, is representing the owner in this transaction.

