

Check One:



4601 Alpine Ave.  
Comstock Park, Michigan 49321  
(616) 784-3900 • Fax (616) 784-5303

# RENTAL APPLICATION



0-13545 Kenowa Ave.  
Grand Rapids, Michigan 49534  
(616) 677-2900 • Fax (616) 677-2901

APARTMENT STYLE AND SIZE DESIRED \_\_\_\_\_

DESIRABLE DATE OF OCCUPANCY \_\_\_\_\_

## Personal Information

APPLICANT'S FULL NAME \_\_\_\_\_  
LAST FIRST MIDDLE

DATE OF BIRTH \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_ DAYTIME PH: \_\_\_\_\_ AGE \_\_\_\_\_

OTHER RESIDENTS	RELATIONSHIP	AGE (OPTIONAL)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

**NO PETS ARE ALLOWED**

## Residential History

PRESENT FULL ADDRESS \_\_\_\_\_ LANDLORD OR MORTGAGOR \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER OF APPLICANT \_\_\_\_\_ LENGTH OF TIME AT ADDRESS \_\_\_\_\_

MONTHLY PAYMENT \_\_\_\_\_ REASON FOR MOVING \_\_\_\_\_

PREVIOUS FULL ADDRESS \_\_\_\_\_ LANDLORD OR MORTGAGOR \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MONTHLY PAYMENT \_\_\_\_\_ LENGTH OF TIME AT ADDRESS \_\_\_\_\_

## Employment History

APPLICANT'S EMPLOYER \_\_\_\_\_ LENGTH OF TIME \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ POSITION \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

OTHER RESIDENT(S)

RESIDENT \_\_\_\_\_ EMPLOYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

RESIDENT \_\_\_\_\_ EMPLOYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

IF MORE SPACE IS NECESSARY, PLEASE ATTACH ADDITIONAL SHEETS.

# References

BANK \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

CHECKING ACCOUNT NUMBER \_\_\_\_\_ SAVINGS ACCOUNT NUMBER \_\_\_\_\_

CREDIT REFERENCE (CHARGE CARD) \_\_\_\_\_ ACCOUNT NUMBER \_\_\_\_\_  
COMPANY NAME OF CARD

PHONE \_\_\_\_\_ DATE STARTED \_\_\_\_\_

CREDIT REFERENCE (CHARGE CARD) \_\_\_\_\_ ACCOUNT NUMBER \_\_\_\_\_  
COMPANY NAME OF CARD

PHONE \_\_\_\_\_ DATE STARTED \_\_\_\_\_

LOAN INSTITUTION	ADDRESS	MONTHLY PAYMENT	BALANCE
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

# Other Information

DRIVER'S LICENSE NUMBER \_\_\_\_\_

AUTOMOBILE(S):

MAKE _____	YEAR _____	COLOR _____	LIC # _____	STATE _____
MAKE _____	YEAR _____	COLOR _____	LIC # _____	STATE _____
MAKE _____	YEAR _____	COLOR _____	LIC # _____	STATE _____

APPLICANT'S YEARLY INCOME \$ \_\_\_\_\_ HOUSEHOLD INCOME \$ \_\_\_\_\_

COMMENTS: \_\_\_\_\_

IN CASE OF EMERGENCY, CONTACT \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE NO. ( ) \_\_\_\_\_

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT, AND I UNDERSTAND THAT THIS APPLICATION MAY BE REVOKED IF ANY INFORMATION FURNISHED UPON THIS APPLICATION IS FOUND TO BE INCORRECT. I AUTHORIZE YOU TO CONTACT ANY REFERENCES LISTED ON THIS APPLICATION.

I UNDERSTAND THAT UNTIL I AM NOTIFIED THAT MY APPLICATION HAS BEEN APPROVED AND A LEASE HAS BEEN SIGNED, NO SPECIFIC RESIDENCE WILL BE HELD IN MY NAME.

IF APPLICANT IS APPROVED, BUT FAILS TO ENTER INTO A LEASE, THE DEPOSIT SHALL BE FORFEITED. DEPOSIT WILL BE RETURNED ONLY IF APPLICANT IS NOT APPROVED.

APPLICANT'S SIGNATURE(S): \_\_\_\_\_

DATE \_\_\_\_\_

\_\_\_\_\_

DATE \_\_\_\_\_

## - FOR OFFICE USE ONLY -

DATE OF APPLICATION \_\_\_\_\_ APPLICATION RECEIVED BY \_\_\_\_\_

<b>REFERENCE VERIFICATION</b> PRESENT ADDRESS <input type="checkbox"/> PREVIOUS ADDRESS <input type="checkbox"/> EMPLOYMENT <input type="checkbox"/> CO-RESIDENT INFORMATION <input type="checkbox"/> BANK CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> CREDIT <input type="checkbox"/> LOANS <input type="checkbox"/>	<b>APPLICATION:</b> APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> DATE OF APPROVAL/DISAPPROVAL _____ APARTMENT # _____ APT. ADDRESS _____ DATE OF OCCUPANCY _____ COMMENTS _____	<b>DEPOSITS:</b> <table border="1"> <thead> <tr> <th>DATE</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> </tbody> </table>	DATE	AMOUNT	_____	_____	_____	_____	_____	_____	_____	_____
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