

Algonac Manor, L.L.C.

Y.O. Box 145, Richmond, MI 48062 Phone (810) 727-9300

Rental Application

The undersigned hereby makes application to rent an apartment located at Fruit St., Algonac, MI 48001.
Beginning on _____ at a monthly rental rate of \$_____. **(1) Bed** _____ or **(2) Bed** _____

FULL NAME _____ PHONE() _____ Age _____
DATE OF BIRTH / / S.S.# _____ DRIVERS LIC.# _____
SPOUSE/CO-APPLICANT _____ DATE OF BIRTH / /
A G E S.S.# _____ DRIVERS LIC.# _____ PET(Dog or Cat)
OTHER OCCUPANTS (Names, Ages, Etc.) _____

PLEASE USE BACK SIDE TO LIST THE FOLLOWING INFORMATION FOR SPOUSE/CO-APPLICANT

CURRENT ADDRESS _____
Date of Move-In / / Owner/Agent _____ Phone() _____
Date of Move-Out / / Reason for leaving _____
PREVIOUS ADDRESS _____
Date of Move-In / / Owner/Agent _____ Phone() _____
Date of Move-Out / / Reason for leaving _____

EMPLOYMENT INFORMATION • Full Time Part Time Student Retired Unemployed
EMPLOYER (Name & Address) _____
Employment Date / / Position _____ Phone() _____
Supervisor _____ Salary \$ _____ Per _____ Average Hrs. Per Wk. _____
IF CURRENT JOB IS LESS THAN (6) MONTHS, LIST PRIOR EMPLOYER INFORMATION:
OTHER INCOME: _____

BANK AND CREDIT REFERENCES-List bank, address, type of account, & account #.

(1) _____ (2) _____
(3) _____ (4) _____

LIST ALL VEHICLES: _____
Have you ever: _____

Filed for Bankruptcy? Yes _____ No _____
Been Evicted for tenancy? Yes _____ No _____

Willfully or intentionally refused to pay rent when due? Yes _____ No _____

Please give any additional information which might help management evaluate this application: _____

IN CASE OF EMERGENCY, CONTACT (NAME, ADDRESS, PHONE) _____

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the 1st day of the month in advance. As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, the application fee will be retained to offset the agent's cost, time and effort in processing my application.

A-CREDIT REPORT WILL BE RUN PRIOR TO ANY APPLICANTS APPROVAL. AT A CHARGE OF \$15.00 PER INDIVIDUAL ADULT.

I **RECOGNIZE THAT AS A PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, AN INVESTIGATIVE CONSUMER REPORT MAY BE PREPARED WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTER VIEWS WITH MY NEIGHBORS, FRIENDS, AND OTHERS WITH WHOM I MAY BE ACQUAINTED. THIS INQUIRY INCLUDES INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING. I UNDERSTAND THAT I MAY HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME TO RECEIVE ADDITIONAL, DETAILED INFORMATION ABOUT THE NATURE AND SCOPE OF THE INVESTMENT.**

The above information to the best of my knowledge, is true and correct.

Signature _____ Date / /

Spouse/Co-Applicant _____