

Meadow View Senior Apartments

4541 South M-88 Highway
Bellaire, MI 49615
(231) 533-8661
Allison Fales, Manager

RENTAL APPLICATION

Please complete all requested information on this form. Thank you for your interest.

Date of Application: _____ Desired Date of Occupancy: _____ Apartment Desired: _____

PERSONAL INFORMATION

Applicants Full Name: _____ Date of Birth: _____

SS#: _____ - _____ - _____ Driver's License No. _____ State: _____

Co-Applicants Full Name: _____ Date of Birth: _____

SS#: _____ - _____ - _____ Driver's License No. _____ State: _____

Relationship to Applicant: _____ Total Gross Monthly Household Income: \$ _____

Amount: \$ _____ Source: _____ Phone #: _____

Amount: \$ _____ Source: _____ Phone #: _____

Comments: _____

Please circle yes or no for the following questions for both Applicant and / or Co-Applicant.

Have YOU or CO-APPLICANT ever?	Applicant	Co-Applicant
Been sued for non-payment of rent?	Yes or No	Yes or No
Been evicted or asked to move out?	Yes or No	Yes or No
Broken a rental agreement?	Yes or No	Yes or No
Caused damage to rental property?	Yes or No	Yes or No
Declared Bankruptcy?	Yes or No	Yes or No

RESIDENCE HISTORY

Present Address: _____ Present Telephone: _____

Dates From: _____ To: _____ Present Landlord or Mortgage Company: _____

Contact Name: _____ Phone Number: _____

I hereby make application for an apartment and certify that the above information is correct. I authorize you to contact any references that I have listed and check my credit references.

Applicants Signature: _____ Date: _____

Co-Applicants Signature: _____ Date: _____

Personal References

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____