

The Shores Apartment Homes
 2700 Lake Pine Path St. Joseph, MI 49085
 PH: 269/429-2289 FX: 269/429-0904 TTY/TDD: 1(800) 649-3777

APPLICATION FOR RESIDENCY

Date _____ Time _____

Name _____ Phone # (Hm) _____ (Wk) _____

Street Address _____ Apt # _____

City _____ State _____ Zip _____

Present Monthly Rent \$ _____ No. of Bedrooms _____ SS # _____ - _____ - _____

Utilities included? _____ \$ _____ per month Spouse SS # _____ - _____ - _____

Retail Credit References _____ \$ _____ / mo
 (List names, address, _____ \$ _____ / mo
 Account # & monthly _____ \$ _____ / mo
 Payment) _____ \$ _____ / mo

Present Landlord's Name _____ Address _____ Ph _____

How long at this address _____ Reason for Moving _____

Previous Landlord's Name _____ Address _____ Ph _____

How long at this address _____ Reason for Moving _____

List all persons who will live in the rental unit. **List head of household first.**

<u>FULL NAME</u>	<u>RELATIONSHIP</u>	<u>BIRTHDATE</u>
(1) _____	_____	_____
(2) _____	_____	_____

EARNED INCOME: List all full and/or part-time employment for all household members (other than minor dependent children). Include self-employment income.

	<u>NAME & ADDRESS of EMPLOYER</u>	<u>HOW LONG</u>	<u>GROSS EARNINGS</u>
Applicant	_____	_____	\$ _____ per _____
Co-Applicant	_____	_____	\$ _____ per _____

Assets:

Checking Accounts Bank / CU _____

Passbook Savings Bank / CU _____

Vehicle Information:

Make _____ Year _____ License # _____

Make _____ Year _____ License # _____

Driver's License Numbers _____

Nearest Relative or Friend to contact in case of Emergency:

Name _____ Address _____ Ph # _____

All application information is true and complete to the best of my knowledge.

Signature _____ Date _____

_____ Date _____

I understand the processing of my application will include the following.

- Credit Report
- Criminal Report/Sex Offender Report
- References Checked
- \$35.00 non-refundable application fee
- Forfeiture of any deposit and/or rent if I do not move into the apartment.

Signature: _____ Date: _____

Signature: _____ Date: _____

Manager: _____ Date: _____

Lease begins _____ ends _____ Possession Date _____ Utilities _____

Credit Check _____ Employment Verified _____

Previous Landlord #1 _____ #2 _____

Accepted / Rejected by _____ Date _____

Applicant Notified by _____ Date _____

Security deposit of \$ _____ Paid Due Date _____

Pro-rata \$ _____ x _____ days = _____ Date _____

1st Month Rent of \$ _____ Paid Due Date _____

Rental Agent _____ Manager _____

COMMENTS: