



**RENTAL APPLICATION**

If you have questions please call:  
810.220.2360

TandRProperties.com

**MAIL TO:** P.O. Box 802 • Brighton, MI • 48116-0802

**DESIRED MOVE IN DATE:** \_\_\_\_\_ **RENTAL UNIT APPLIED FOR:** \_\_\_\_\_

**APPLICANT:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
e-mail: \_\_\_\_\_  
DOB: \_\_\_\_\_  
S.S.#: \_\_\_\_\_  
D.L.#: \_\_\_\_\_

**CO-APPLICANT:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
e-mail: \_\_\_\_\_  
DOB: \_\_\_\_\_  
S.S.#: \_\_\_\_\_  
D.L.#: \_\_\_\_\_

OTHER RESIDENTS - NAME(S)	DRIVERS LICENSE NUMBER (IF APPLICABLE)	AGE	RELATIONSHIP

**PETS ARE NOT ALLOWED AT SOME PROPERTIES. PETS MUST BE PREAPPROVED. DEPOSIT AND FEES ARE REQUIRED.**

1. PET'S NAME	TYPE (DOG, CAT)	FIXED -Y/N	2. PET'S NAME	TYPE (DOG, CAT)	FIXED -Y/N

**APPLICANT'S EMPLOYER:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Length of Time: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Salary: \_\_\_\_\_

**CO-APPLICANT'S EMPLOYER:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Length of Time: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Salary: \_\_\_\_\_

**APPLICANT'S VEHICLE:**

Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
License Plate #: \_\_\_\_\_

**CO-APPLICANT'S VEHICLE:**

Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
License Plate #: \_\_\_\_\_

<b>APPLICANT'S CHECKING/SAVINGS ACCOUNT:</b>	<b>CO-APPLICANT'S CHECKING/SAVINGS ACCOUNT:</b>
Type: _____ Account #: _____ Balance: \$ _____	Type: _____ Account #: _____ Balance: \$ _____

**INSTALLMENT DEBTS (Charge Accounts, Autos, etc.)**

<b>APPLICANT:</b>	<b>CO-APPLICANT:</b>
Name.: _____ Account #: _____ Balance: _____ Monthly Payment: \$ _____	Name.: _____ Account #: _____ Balance: _____ Monthly Payment: \$ _____
Name.: _____ Account #: _____ Balance: _____ Monthly Payment: \$ _____	Name.: _____ Account #: _____ Balance: _____ Monthly Payment: \$ _____

**LANDLORDS: (Please list the information requested for CURRENT and previous landlords)**

Name: _____ City, State: _____ Phone #: _____ Length of Time: _____ Rent: \$ _____	Name: _____ City, State: _____ Phone #: _____ Length of Time: _____ Rent: \$ _____
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	APPLICANT	CO-APPLICANT
ARE YOU A U.S. CITIZEN?	YES NO	YES NO
HAVE YOU EVER BEEN EVICTED FROM ANY TENANCY?*	YES NO	YES NO
HAVE YOU EVER or DO YOU PLAN TO FILE FOR BANKRUPTCY?*	YES NO	YES NO
HAVE YOU EVER REFUSED TO PAY ANY RENT WHEN DUE?*	YES NO	YES NO
DO YOU HAVE A CRIMINAL RECORD*	YES NO	YES NO
DO YOU HAVE A MEDICAL MARIJUANA LICENSE? USE GROW DISTRIBUTE*	YES NO	YES NO

\*IF YES, PLEASE EXPLAIN:

**In case of an emergency, who should we contact?** Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLEASE NOTE: RENTAL APPLICATION FEE – PAYABLE in CASH or MONEY ORDER ONLY**

Applicant(s) agrees to the following by signing below:

The processing fee, (i.e. credit report, reference checking, administrative fees), is \$30.00 (Thirty Dollars), **PER APPLICANT** and is non-refundable.

Tenancy will commence on \_\_\_\_\_. Tenancy is to be on a \_\_\_\_\_ basis.

That if either/any applicant withdraws or cancels this application no part of the application fee will be refunded.

**AUTHORIZATION to RELEASE INFORMATION:** Applicant understands that this application may be shared with a credit reporting service now and in the future and that a criminal background check may be performed. Applicant gives current or previous landlords and employer's permission to confirm information contained in this application. Authorization is also given for the release of information with regard to employment, wages, rent payment history, etc.

**NO GUARANTEE OF OCCUPANCY:** Applicant also understands that completing this application in no way guarantees occupancy. Application for rental may be denied if false information is provided.

<b>APPLICANT'S SIGNATURE</b> X _____ Date: _____	<b>CO-APPLICANT'S SIGNATURE</b> X _____ Date: _____
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