



RENTAL APPLICATION

Applicant's full name _____ (please print)

Cell Phone # _____ DOB ____/____/____

Social Security # _____

Drivers License # _____ State _____

Macomb Address _____

Email Address: _____

Auto Yr ____ Make _____ Model _____ State/License Plate# _____

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Parent's names _____

Parent's address _____

City _____ State _____ Zip _____

Parents phone number: _____

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Please provide a permanent mailing address where your security deposit refund can be mailed:

Name _____

Address _____

City _____ State _____ Zip _____

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Have you ever been evicted in the past? [] Yes [] No

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at a tenant decision, I understand that the landlord may terminate any rental agreement entered into for any misrepresentations made above.

Signature _____ Date _____