



CHILDS LAKE ESTATES
 4377 OLD PLANK ROAD, MILFORD, MI 48381
 PHONE: 248 685-3380 FAX: 248 684-5995

<input type="checkbox"/>	Credit
<input type="checkbox"/>	Criminal
<input type="checkbox"/>	Landlord
<input type="checkbox"/>	Pet Photo
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

APPLICATION FOR RESIDENCY AND AGREEMENT TO LEASE

Date _____

Address of Application _____ Lot No. _____

BASE RENT _____
 PET CHARGE _____
 ADDITIONAL ADULT _____
 TAX _____
 TOTAL _____

SECURITY DEPOSIT _____
 NON-REFUNDABLE APPLICATION FEE _____

APPLICANT OFFERS TO LEASE THE PREMISES FOR A TERM OF 12 MONTHS

FIRST ADULT

Name: (Last) _____ (First) _____ (Middle) _____
 Soc. Sec. No. _____ Date of Birth _____
 Driver's License No. _____ State _____
 Street _____
 City _____ State & Zip _____
 No. of Years _____ Home Phone No. _____
 Owner/Manager _____ Phone (Manager) _____

SECOND ADULT

Name: (Last) _____ (First) _____ (Middle) _____
 Soc. Sec. No. _____ Date of Birth _____
 Driver's License No. _____ State _____
 Street _____
 City _____ State & Zip _____
 No. of Years _____ Home Phone No. _____
 Owner/Manager _____ Phone (Manager) _____

PREVIOUS ADDRESS

Street _____
 City _____ State & Zip _____
 No. of Years _____
 Owner/Manager _____ Phone (Manager) _____

PREVIOUS ADDRESS - Second Adult

Street _____
 City _____ State & Zip _____
 No. of Years _____ Home Phone No. _____
 Owner/Manager _____ Phone (Manager) _____

EMPLOYMENT

Employer _____ Phone No. _____
 Years Emp. _____ Position _____ Monthly Income _____
 Address _____
 City _____ State & Zip _____

EMPLOYMENT

Employer _____ Phone No. _____
 Years Emp. _____ Position _____ Monthly Income _____
 Address _____
 City _____ State & Zip _____

PREVIOUS EMPLOYER

Employer _____ Phone No. _____
 Years Emp. _____ Position _____ Monthly Income _____
 Address _____
 City _____ State & Zip _____

PREVIOUS EMPLOYER

Employer _____ Phone No. _____
 Years Emp. _____ Position _____ Monthly Income _____
 Address _____
 City _____ State & Zip _____

IN CASE OF EMERGENCY NOTIFY:

Name

Relationship Phone No

City State & Zip

Name

Relationship Phone No.

City State & Zip

NAMES OF OTHER OCCUPANTS (19 OR OLDER MUST SUPPLY SOCIAL SECURITY & DRIVERS LICENSE NUMBERS)

1) Name (Last) (First) (Middle) Date of Birth

Drivers License No. State Soc. Sec. No.

2) Name (Last) (First) (Middle) Date of Birth

Drivers License No. State Soc. Sec. No.

3) Name (Last) (First) (Middle) Date of Birth

4) Name (Last) (First) (Middle) Date of Birth

5) Name (Last) (First) (Middle) Date of Birth

6) Name (Last) (First) (Middle) Date of Birth

PETS (2 PER HOME SITE)

1) Type Size Color Name

2) Type Size Color Name

AUTOMOBILES

1) Year Make Model Color License Plate No.

2) Year Make Model Color License Plate No.

INFORMATION RELEASE

Applicant grants authorization to obtain consumer report information from various local, state, and/or federal government agencies, including and without limitation, various law enforcement characteristics, and /or mode of living. Applicant also grants authorization to obtain a landlord, criminal and fugitive check. Applicant also grants authorization to obtain any of the above reports at any time during or after the application process.

I (WE) CERTIFY THAT I (WE), THE UNDERSIGNED APPLICANT(S), HAVE READ AND AGREED TO ALL OF THE ENTRIES MADE UPON THIS APPLICATION FORM AND DO ALSO AGREE TO ALL THE PROVISIONS PRINTED ON THE FACE AND ON THE REVERSE SIDE OF THIS DOCUMENTS:

PLEASE CALL 248 685-3380 AND MAKE AN APPOINTMENT TO SIGN YOUR LEASE WHEN CLOSING IS SCHEDULED.

Signature of Legal Age Applicant Date Signature of Legal Age Applicant Date

Witness Date

MAKE OF MANUFACTURED HOME _____ **YEAR** _____ **SIZE** _____

PURCHASED FROM _____ **SALESMAN** _____

PHONE NO. _____ **PREVIOUS OWNER** _____

FINANCED BY _____

This application and the money herewith are submitted upon the following terms and conditions.

1. Management shall approve or reject this application within a reasonable time. No application is accepted until approved in writing signed by Management's duly authorized representative.
2. If this application is approved, the money deposited herewith shall be applied by Management in the manner indicated on the reverse side or applied toward Management's damages should the applicant fail to execute a lease agreement.
3. If the application is rejected, the money deposited herewith shall be returned promptly to the applicant except for the non-refundable application charge, which is for expenses incurred in processing the application.
4. Upon approval of the application by Management, the applicant is hereby obligated to immediately execute a 12-month lease agreement with Management or execute a written statement of refusal. Applicant has reviewed copies of said lease agreement and the rules and regulations and they are satisfactory in form and substance. Applicant is willing and able to enter into the lease agreement and to be bound by its provisions and by the provisions of the rules and regulations. **APPLICANT ACKNOWLEDGES THAT APPLICANT HAS NOTED THE FOLLOWING PROVISIONS OF THE LEASE.**

Paragraph	Relating to:
_____	Term
_____	Rent
_____	Late Charges
_____	Security Deposit
_____	Pets
_____	Notice of Intent to Vacate or Renew
_____	(Any other Specific Provision Management Wishes Applicant to Acknowledge)

5. Applicant shall not be entitled to possession of the premises described in this application nor have any other rights in the premises until this application is approved, the lease agreement or written statement of refusal executed and all advance payments made to Management.
6. Applicant represents and warrants that he is not a representative or agent for any party other than as set forth in this application, that the premises will not be occupied by any parties other than as indicated on the rental application, and that there are no false or misleading statements set forth on the application. In case of breach of any representation or warranty set forth in this paragraph, Management shall have the right to rescind approval of the application and terminate the lease.
7. Applicant acknowledges that he is aware that NO PETS are permitted at any time except as stated in a written Pet Agreement if any is authorized by Management.
8. In making this application, Applicant agrees that Management and Applicant will complete, if applicable, two copies of an inventory checklist furnished by Management and the Applicant shall review and complete the same, note the condition of the property on such premises, and return one copy of the checklist to Management prior to taking possession of the premises or within 7 days after obtaining possession.
9. If any provision of this application for residency and agreement to lease should be or become invalid such invalidity shall not in any way affect any of the other provisions hereof which shall continue to remain in full force and effect.