



PROPERTY MANAGEMENT
OF THE LAKESHORE, INC.

Offering Professional Rental Management

101 W. Loomis St. • Suite 201 • Ludington, MI 49431

Phone 231-845-8544 Fax 231-843-8845

manager@pmlakeshore.com • pmlakeshore.com

RENTAL APPLICATION

DRIVERS LICENSE & SOCIAL SECURITY CARD REQUIRED

Applicant is interested in renting: _____

APPLICANT #1

Name _____ Social security # _____

Drivers license # _____ Date of birth _____ Telephone # _____

Current address: _____ How long? _____

Previous address (if less than 2 years) _____

Do you smoke? _____ Do you have pets? _____ Type of pets _____

Personal reference (*cannot be Landlord or Family*) _____ Telephone # _____

Have you ever been arrested? _____ Have you ever been evicted? _____

Current landlord _____ Telephone # _____

Previous landlord _____ Telephone # _____

Employer _____ Position _____

Address _____

Supervisor _____ Telephone # _____ Ext. _____

How long at present job? _____ Monthly income _____

Applicant Signature _____

APPLICANT #2

Name _____ Social security # _____

Drivers license # _____ Date of birth _____ Telephone # _____

Current address: _____ How long? _____

Previous address (if less than 2 years) _____

Do you smoke? _____ Do you have pets? _____ Type of pets _____

Personal reference (*cannot be Landlord or Family*) _____ Telephone # _____

Have you ever been arrested? _____ Have you ever been evicted? _____

Current landlord _____ Telephone # _____

Previous landlord _____ Telephone # _____

Employer _____ Position _____

Address _____

Supervisor _____ Telephone # _____ Ext. _____

How long at present job? _____ Monthly income _____

Applicant Signature _____

The information provided by the applicant(s) will be used by the Landlord or his/her agent to determine whether to accept or reject this application. Upon written request within 30 days, the Landlord or his/her agent will disclose to applicant in writing the nature and scope of any investigation that has been requested, and will, if this applicant is refused, state in writing the reason for refusal.



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CREDIT REFERENCE APPLICANT #1
For special consideration - add your credit reference

Date: _____ Company Name _____

Account Number _____ Type of Loan _____

Phone Number _____

Fax Number **MUST HAVE FAX NUMBER TO PROCESS APPLICATION** _____

I, _____ SS# _____

give permission for Property Management of the Lakeshore, Inc. to obtain a credit reference. This includes information regarding timely payments, overdue payments, and past due amounts.

Sincerely,

Applicant Signature

APPLICANT, DO NOT WRITE BELOW DOTTED LINE!

Please fax back with the information filled in below

Length of credit history _____

of late payments _____

Account status _____

Signature of person giving reference _____

Print name _____

Linda J. O'Brien
General Manager/Owner
Property Management of the Lakeshore, Inc.



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EMPLOYMENT REFERENCE APPLICANT #1

Date: _____

Company name _____

Address _____

Phone # _____

Fax # _____

I, _____ SS# _____

give permission for Property Management of the Lakeshore, Inc. to obtain an employment reference. This includes information regarding the amount of my pay along with the length of my employment.

Sincerely

Applicant Signature

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Please fax back with the information filled in below

Length of employment _____

Salary or wage _____ per _____ number of hours/week _____

Signature of person giving reference _____

Print name _____

Linda J. O'Brien

General Manager/Owner

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LANDLORD REFERENCE APPLICANT #1

Date: _____

Landlord name _____

Rental address _____

Phone # _____

Fax # _____

I, _____ SS# _____

give permission for Property Management of the Lakeshore, Inc. to obtain a landlord reference. This includes information regarding my rental history or payments, conditions, & any legal issues.

Sincerely

Applicant Signature

APPLICANT, DO NOT WRITE BELOW DOTTED LINE!

Please fax back with the information filled in below

Rental term _____

of late payments _____

Is tenant current? _____

Any legal issues while renting? _____

Would you rent to this tenant again? _____

Signature of person giving reference _____

Print name _____

Linda J. O'Brien

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CREDIT REFERENCE APPLICANT #2
For special consideration - add your credit reference

Date: _____ Company Name _____

Account Number _____ Type of Loan _____

Phone Number _____

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Date: _____

Company name _____

Address _____

Phone Number _____

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LANDLORD REFERENCE APPLICANT #2

Date: _____

Landlord name _____

Rental address _____

Phone # _____

Fax # _____

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