

CAMELOT ASSOCIATES LLC

P.O. BOX 952
BIRMINGHAM, MICHIGAN 48012
Office: 248-288-1544, Fax 248 593-5608

RENTAL APPLICATION

APARTMENT ADDRESS: _____ Apt. No. _____

Monthly Rental Rate \$ _____ Term of Lease _____ Type of Apartment _____

Date Rental to Start _____ Security Deposit..... \$ _____
MONTH DAY YEAR

First Month's Rent..... \$ _____

Application & Entry Fee..... \$ _____

TOTAL..... \$ _____

Less Total Paid with Application..... \$ _____

BALANCE DUE (Cashier's Check or Money Order if Application is Accepted) \$ _____

PERSONAL INFORMATION

APPLICANT'S FULL NAME _____ Co-RESIDENT'S NAME _____

Date of Birth _____ Co-Resident's Date of Birth _____ Marital Status _____

OTHER RESIDENT(S) RELATIONSHIP(S) DATE(S) OF BIRTH

PET _____ BOAT / REC. VEHICLE _____ OTHERS _____

OTHER REMARKS _____

RESIDENT HISTORY

PRESENT ADDRESS _____ City _____ State _____ Zip _____

E-mail address _____

Present Telephone _____ Length of Time at Present Address _____

Present Landlord or Mortgage Holder _____ Telephone _____

Present Rent \$ _____ Reason for Moving _____

PREVIOUS ADDRESS _____ City _____ State _____ Zip _____

Length of Time at Previous Address _____

Previous Landlord or Mortgage Holder _____ Telephone _____

Amount of Rent \$ _____ Reason for Moving _____

EMPLOYMENT INFORMATION

EMPLOYED BY _____ Starting Date _____

Employer's Address _____ Telephone _____

Position Held _____ Gross Monthly Income \$ _____

Social Security No. _____ Supervisor _____ Telephone _____

CO-RESIDENT'S EMPLOYER _____ Starting Date _____

Employer's Address _____ Telephone _____

Position Held _____ Gross Monthly Income \$ _____

Social Security No. _____ Supervisor _____ Telephone _____

BANKING AND CREDIT REFERENCES

BANK _____ Checking Acct. No. _____ Savings Acct. No. _____

CREDIT REFERENCE _____

CREDIT REFERENCE _____

CREDIT REFERENCE _____

OTHER INFORMATION

No. of Vehicles (including company cars) _____ Driver's Lic. #: Self _____ Spouse _____

Make _____ Year _____ Color _____ Tag No. _____ State _____

Make _____ Year _____ Color _____ Tag No. _____ State _____

Make _____ Year _____ Color _____ Tag No. _____ State _____

Other Remarks (no storage allowed outside approved areas) _____

In Case of Personal Emergency, Notify: _____ Relationship _____

Address _____ City _____ State _____ Zip _____ Telephone _____

In Case of Personal Emergency, Notify: _____ Relationship _____

Address _____ City _____ State _____ Zip _____ Telephone _____

I hereby make application for an apartment and certify that the above information is correct. I authorize you to contact any references that I have listed and to check my credit records.

APPLICANT'S SIGNATURE _____ CO-SIGNED _____ DATE _____

Revised: 5/15/2009

-----FOR OFFICE USE ONLY - DO NOT WRITE BELOW-----