## **162 MIDWAY DRIVE**

# TO SUBMIT:

DROP OFF AT LAKE
SUPERIOR VILLAGE OFFICE
IN THE SECURE DROPBOX
LOCATED AT 1901
LONGYEAR AVE, MQT OR EMAIL TO

SFOGAROLI@MQTHC.ORG



**Head of Household:** 

## **Michigan Rental Application**

PROPERTY APPLYING FOR: \_\_\_\_162 Midway Drive Negaunee, MI 49855\_\_\_\_

Birth Date\_\_\_\_\_



Social Security #\_\_\_\_\_

## **Personal Information**

Full Name\_\_\_\_\_

Driver's License # / State  Co-Head: Full Name				Email	
				Social Security #	
Driver's License # / State		Phone #		Email	
Children Occupants (	(Please	include unbor	n children)		
Full Name - First, Middle, Last		Birth Date		Relationship to You	
Rental History					
Head of Household (Please I	list your th	nree most recent addre	esses or from past f	ive years).	
		Current Address	Previous Add	dress	Previous Address
Street Address / Unit No.					
City, State, Zip					
How long at this address					
Manager/Owner Name					
Manager/Owner Phone					
Co-Head of Household (Plea	ase list you	ur three most recent a	ddresses or from po	ast five years	).
	Current Address		Previous Address		Previous Address
Street Address / Unit No.					
City, State, Zip					
How long at this address					
Manager/Owner Name					
Manager/Owner Phone					

## $\textbf{Household Income} \ \textit{(Please list employment from past five years \& other sources of income)}.$

## **Head of Household Employment History**

	Current Employer	Previous Employer	Previous Employer
Employed by			
Position			
Dates of Employment (FromTo)			
Monthly Income			
Name of Supervisor			
Supervisor's Phone #			
Address - Street, City, State, Zip			

## **Co-Head Employment History** (*Please list employment from past five years & other sources of income*).

	Current Employer	Previous Employer	Previous Employer
Employed by			
Position			
Dates of Employment (FromTo)			
Monthly Income			
Name of Supervisor			
Supervisor's Phone #			
Address - Street, City, State, Zip			

#### **Other Income**

Name of Household Member	Monthly Income	Unearned (SS, Child Support, Etc)	Gig Source (Door Dash, Etc)	Self-Employment/Contractor

Emergency Contact Information			Relationship _		
Address - Street, City, State, Zip Name	Phone	#			
Address - Street, City, State, Zip		т			
Vehicle Information					
Make & Model	Year	Color	Plate #	State	
Other Information			1		
Have you ever been evicted?	No 🗌	Yes			
If yes, when & why					
Have you ever filed for bankrupto	y? No 🗌	Yes 🗌			
If yes, when & why					
Do you currently smoke?	No 🗌	Yes 🗌			
Do you have any pets?	No 🗌	Yes			
If Yes, please list each Type, Breed	& Approx. Wei	ight			
How did you learn about us?					
Agreement & Consent Under penalties of perjury, I/we certify knowledge and belief. The information person(s) outlined in Part II acceptable information I/we provided, communicate background check to obtain additional representations herein constitutes an application or the termination of the leupon any member of the household in for a home or apartment and does not be the constitution of the leupon and the constitution of the leupon any member of the household in for a home or apartment and does not be the constitution of the leupon and the constitution of the leupon an	on on this form with everification of cation with all named information on a cat of fraud. Falease agreement in the coving out of the	ill be used to determine no current anticipated annua- nes listed on this applicati- credit history. The unders lse, misleading, or incom if discovered thereafter e- unit or any new member	naximum income eligibility.  Il income. I/We hereby autho ion, and for the issuer of this signed further understands tl plete information may result xecution. I/We agree to notif moving in. I/We understand	I/we have provided for each prize the verification of the sort form to conduct a hat providing false in the rejection of this by the landlord immediately	
Signature	Date	 Signatu	ıre	 Date	