

Mutual Property Management, LLC

33004 Grand River Avenue, Farmington, MI 48336

Ph: 248-474-6464 ext 307 E-Fax: 248-850-2294

Email Applications to: amy@themutualteam.com

Lease Submission Checklist and Lease Application

The following required documentation **MUST** be submitted in order to process your application.

- Rental Application (***Begins on the next page***)
- Non-Refundable Application Fee: **\$50.00**
- If currently renting, you **MUST** provide **proof of rental payments** for the last 12 months, as well as your **current landlord's name and email address**. (Examples include canceled checks, bank statements, money orders, etc.)
- Paystubs for one month
- W2 for last year
- Full Tax Returns (**If self employed**)
- One Month of Bank / Investment Account Statement(s) (**ALL PAGES NECESSARY**)
- Copy of Driver's License(s) or Government Issued Photo ID
- Copy of Current Utility bill(s)
- Proof of Government Assistance – Section 8/SSI / FIA (**If applicable**)
- Explanation letter for special circumstances
- Please do **not** submit a credit report with your application. We will secure a copy of your credit report to be used with your application.
- Please note: if approved, a \$10.00/month tenant management fee will be due each month, in addition to your monthly rental amount, beginning when you move into the property.

LEASE APPLICATION

LEASE TERMS

Subject Property Address (street, city, state & ZIP):

Monthly Rent Amount for Subject Property
\$ _____

Length of Lease
1 yr 2 yr 3 yr
Other _____ (Please state length of lease)

Requested Move-in Date
_____/_____/_____

Applicant

Co-Applicant

Name

Name

Social Security Number

D/O/B (mm/dd/yyyy)

Social Security Number

D/O/B (mm/dd/yyyy)

Cell Phone (incl. area code)

Work Phone (incl. area code)

Cell Phone (incl. area code)

Work Phone (incl. area code)

Email

Email

Current Address (street)

OWN / RENT

Number of Years _____

Monthly \$ _____

Current Address (street)

OWN / RENT

Number of Years _____

Monthly \$ _____

(City, State & ZIP)

(City, State & ZIP)

Reason for Moving

Reason for Moving

CURRENT LANDLORD NAME & EMAIL ADDRESS

CURRENT LANDLORD NAME & EMAIL ADDRESS

IF RESIDING AT CURRENT ADDRESS FOR LESS THAN TWO YEARS, YOU MUST COMPLETE THE FOLLOWING:

Former Address (street)

OWN / RENT

Number of Years _____

Monthly \$ _____

Former Address (street)

OWN / RENT

Number of Years _____

Monthly \$ _____

City, State & ZIP

City, State & ZIP

Former Landlord Name & Number

Former Landlord Name & Number

*****DO NOT WRITE BELOW THIS LINE! CONTINUE ONTO THE NEXT PAGE!*****

Proof of Income Received **YES NO** MPM Agent _____

Showing Agent _____

Verified Employment **YES NO** Owner _____

Company _____

Rental History Confirmed **YES NO** Market Rent \$ _____

Phone # (_____) _____ - _____

Approved Denied By _____ Notes _____

| EMPLOYMENT INFORMATION | | | |
|--|--|----------------------------------|----------------------------------|
| Applicant | | Co-Applicant | |
| Name & Address of Employer | Dates Employed | Name and Address of Employer | Dates Employed |
| | Monthly Income | | Monthly Income |
| | Self Employed YES / NO | | Self Employed YES / NO |
| Position/Title/Type of Business | | Position/Title/Type of Business | |
| Name of Supervisor or HR Contact | Contact Number | Name of Supervisor or HR Contact | Contact Number |
| <i>IF EMPLOYED IN CURRENT POSITION FOR LESS THAN TWO YEARS OR IF CURRENTLY EMPLOYED IN MORE THAN ONE POSITION, PLEASE COMPLETE THE FOLLOWING:</i> | | | |
| Name & Address of Employer | Dates Employed | Name and Address of Employer | Dates Employed |
| | Monthly Income | | Monthly Income |
| | Self Employed YES / NO | | Self Employed YES / NO |
| Position/Title/Type of Business | Business Phone | Position/Title/Type of Business | Business Phone |
| Name of Supervisor or HR Contact | Contact Number | Name of Supervisor or HR Contact | Contact Number |
| Applicant | ADDITIONAL INCOME | | Co-Applicant |
| Government Assistance Program (Section 8 / FIA) | Government Assistant Program (Section 8 / FIA) | | |
| Alimony / Child Support | Alimony / Child Support | | |
| SSI / Disability | SSI / Disability | | |

| ASSETS (COMPLETE STATEMENT(S) REQUIRED) | | | | | |
|---|-----------------------|--------------|---|-----------------------|---|
| Applicant | | | Co-Applicant | | |
| Name of Bank/Credit Union or Investment Company | | | Name of Bank/Credit Union or Investment Company | | |
| Account Number | Current Balance \$ | | Account Number | Current Balance \$ | |
| Name of Bank/Credit Union or Investment Company | | | Name of Bank/Credit Union or Investment Company | | |
| Account Number | Current Balance \$ | | Account Number | Current Balance \$ | |
| Applicant | | DECLARATIONS | | Co-Applicant | |
| Have you been convicted of a felony? (Please explain) | Y | N | Have you been convicted of a felony? (Please explain) | Y | N |
| Have you ever broken a lease or been evicted? (Please explain) | Y | N | Have you ever broken a lease or been evicted? (Please explain) | Y | N |
| Do you pay Alimony or Child Support? (If yes, provide a copy of the Court Order) | Y | N | Do you pay Alimony or Child Support? (If yes, provide a copy of the Court Order) | Y | N |
| How much per month? \$ _____ | | | How much per month? \$ _____ | | |
| OCCUPANT INFORMATION | | | | | |
| Name _____ | | Name _____ | | | |
| Name _____ | | Name _____ | | | |
| Name _____ | | Name _____ | | | |
| Name _____ | | Name _____ | | | |
| Name _____ | | Name _____ | | | |
| PETS | | | | | |
| (Please list Type, Breed, Sex, Approximate Weight & Age) | | | | | |

RENTAL APPLICATION PAYMENT

___ Cash ___ Money Order ___ Credit/Debit Card Received By: _____

Credit Card (circle one) VISA MasterCard Discover American Express

Credit Card Number ----- Expiration Date ___/___/___

Amount: \$50.00 Name Exactly as it Appears on Card: _____

Billing address(Street/City/State & ZIP): _____

As the credit/debit card holder, I authorize Mutual Property Management, LLC, to charge my card for the amount indicated above.

X _____ Date: ___/___/___

ACKNOWLEDGEMENT AND AGREEMENT

By signing below I/We certify that the answers given herein are true and complete to the best of my/our knowledge. I/We authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at an application decision. I/We consent for a credit report to be ordered and reviewed. I/We understand that the landlord may terminate any rental agreement entered into for any misrepresentation made above. I/We further agree to provide Mutual Property Management any and all information and documentation upon request. Such information includes: Employment history and verification, prior rental history and verification, and a complete background check, including criminal convictions and previous evictions. I/We understand that if approved, a \$10.00/month tenant management fee will be due each month, in addition to my monthly rental amount, beginning with my initial move into the property.

I/We understand that payment of a property holding deposit shall result in Mutual Property Management not accepting any other tenant(s) for rental of this property up to the start of my/our lease. I/We understand that this deposit will become my security deposit when I/We move in. I/We also understand and agree that if I/We decide not to move in for any reason, the holding deposit will be forfeited and is non-refundable.

Applicant Signature Date Co-Applicant Signature Date
X _____ ___/___/___ X _____ ___/___/___

Applicant: _____
(Please print)

Co-Applicant: _____
(Please Print)