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: **$75.00 *per applicant***

☐ 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 $17.00/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 & NUMBER**	

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
IF EMPLOYED IN CURRENT POSITION FOR LESS THAN TWO YEARS OR IF CURRENTLY EMPLOYED IN MORE THAN ONE POSITION, PLEASE COMPLETE THE FOLLOWING:			
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 $

DECLARATIONS

Applicant			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) **How much per month? $_____**	**Y**	**N**	**Do you pay Alimony or Child Support? (If yes, provide a copy of the Court Order)** **How much per month? $_____**	**Y**	**N**

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 _____/_____

To determine total application fee multiply the number of applicants by $75:

Number of Applicants: _____ X $75 = Total Amount Due: $_____

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 $17.00/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 payment of the first month's rent 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: _____ Co-Applicant: _____

(Please print) (Please Print)