TIGERCORP PROPERTY MANAGEMENT

1940 E. Michigan Avenue Albion, Michigan 49224 (517) 629-3882 Fax (517) 629-8632

RENTAL APPLICATION

FOR OFFICE USE ONLY

DATE ______ AGENT ____

COMMUNITY ____

APT. NO. _____ RENT S

Notice: Co-Applicant must complete a			que un subse	
The undersigned hereby makes app	lication to rent unit number		located at	-7 I = 1 X
beginning on		at a m	nonthly rental of	5
PLEASE TELL US ABOUT YO	URSELF			
FULL NAME			Home	Phone
Date of Birth Socia	Security No		Work	Phone
Driver's Lic. No./State		E-mail.	Cell P	hone
CO-APPLICANT		Relationship	Phone	
Date of Birth Social Se	ecurity No	Driver's Lic. N	lo./State	
Names of All Other Occupants		Tot	tal Number of Oc	cupants
How Many Pets? Kin	nd of Pet, Breed, Weight and	Age		AND EVEL
PLEASE GIVE YOUR RESIDEN	NCE HISTORY FOR THE F	PAST 3 YEARS (Begi	inning With Mo	ost Current)
CURRENT ADDRESS				
Month & Year Moved In	Rea	ison for Leaving		
Owner or Agent		Phone ()		Monthly Payment S
PREVIOUS ADDRESS (If within 3 yes				
Month & Year Moved In	Moved Out	Reaso	n for Leaving	
Owner or Agent				()
PREVIOUS ADDRESS (If within 3 yes			10000	
Month & Year Moved In			n for Landina	
Owner or Agent				
SSOLVANIA (A PROJECT			Phone	1
PLEASE GIVE YOUR EMPLOY				
YOUR STATUS: Employed Full- CURRENT EMPLOYER (Or Most Rec		me 🗆 Student	□ Retired □	Not Employed
Address		90-11-11	Marin I	1
Date(s) Employed/From				1
				ss Monthly Income S
PREVIOUS EMPLOYER			— Household Gra	ss monthly income s
			Phone (114
Date(s) Employed / From				
if there are other sources of income for confirmation, You do NOT have	you would like us to consider of	ease list income, source ar	nd derson (Ranker	Entologier etc.) who we could conta
Amount 5 Pe				elephone
	CONTRACTOR OF THE			607°040'5
PLEASE LIST YOUR BANK AN	ND CREDIT REFERENCES			A THE PARTY OF THE
YOUR BANK(S)	City-State/Branch	Acct. Numb	oer & Type	Telephone
2				
YOUR CREDIT REFERENCES	City-State	Acct. Numb	oer .	Telephone
Terrorian de la composition della composition de	1337-2317			(arep)(erre
2				
3	A HERE	100 104 104		District State State
TOTAL NUMBER OF VEHICLES (Inclu			11 11 15	
Make/Model	Year	Color	Tag No	./State
Make/Model		Color	Tag No	./State
Other Car, Motorcycle, etc.				
HAVE YOU OR CO-APPLICANT EVER				
Been evicted or asked to move out?		Broken a Rental Agre		
Been sued for damage to rental prope	erty? 🗆 Yes 🗀 No	Declared Bankruptcy	? 🗆 Yes 🔘	No CONTINUED OVE

CANADA CANADA WARA DA WARANA WARANA WAZ	
ow did you hear about our property?	
management has any questions about your application, please	
ay Phone:Night	
N CASE OF PERSONAL EMERGENCY, NOTIFY:	Relationship:
ull Address:	
lome Phone: Work F	Phone:
and agree that the rental is to be payable the to the owner of the property and to the agent to acc	is for the term and upon the conditions above set forth day of each month in advance. As an inducement sept this application, I warrant that all statements above ade above be a misrepresentation or not a true statement ned to offset the agent's cost, time, and effort in
within business banking days. Upon acceptance of the security deposit. When so approved and accept before possession is given and to pay the balance of I days after being notified of acceptance, or the deposi agent's time and effort in processing my inquiry and my credit, character, and reputation. If this applicati deposit will be refunded, the applicant thereby waiving	RDISI, CREDIT AND PERSONAL REFERENCES THAT I HAVE
The above information, to the best of my knowledge, i	ANAGEMENT TO OBTAIN MY CONSUMER CREDIT REPORT.
	Date Signed / /
Signature of Co-Applicant	
WMENT OF \$RECEIVED BY (NAME)	E DO NOT WRITE BELOW DATE
YMENT OF \$ RECEIVED BY (NAME) IS APPLICATION FORM RECEIVED BY (NAME)	DATE DATE
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