

# BLACKWOOD APARTMENTS RENTAL APPLICATION

**\*\* PLEASE NOTE YOU ARE APPLYING FOR A NON SMOKING APARTMENT \*\***

2960 Beach Road, Port Huron Twp., MI 48060 (810)310-0527

## PROVIDING A CLEAN AND COMFORTABLE LIVING ATMOSPHERE

Date \_\_\_\_\_

Property Address _____	Number of persons to occupy apt. _____
Term of lease _____	Rental
rate _____	
Applicant's name _____	Birthday _____
Co-Applicant's name _____	Birthday _____
Present Address _____	Phone Number _____
Children's Name(s) _____	Ages _____
Present Landlord _____	Who to Contact _____
Address _____	Phone Number _____
If you have lived there less than five years what was your previous address	
_____	

## APPLICANT'S EMPLOYMENT INFORMATION

Applicant's Employment _____	How long? _____
Address _____	Who to contact to verify employment _____
Phone # _____	Position _____
Monthly Gross Income _____	Social Security # _____

Co-Applicant's Employment _____	How long? _____
Address _____	Who to contact to verify employment _____
Phone # _____	Position _____
Monthly Gross Income _____	Social Security # _____

## CO-APPLICANT'S EMPLOYMENT INFORMATION

**APPLICANT'S BANKING INFORMATION**

Applicant banks at _____	Branch _____
Checking Account Number _____	Savings Account Number _____

**IN MAKING THIS APPLICATION IT IS MUTUALLY AGREED BETWEEN BLACKWOOD APARTMENTS AND THE PROPOSED TENANT**

(1) Possession of the above described premises will not be given to the tenant until this application has been verified and approved by the landlord.

(2) The landlord will either accept or reject the application within three days from the date of application, which the landlord may reject without stating any reason whatsoever for doing.

(3) If the balance of the first's months' rent and security deposit are not paid within five days after the application is accepted, the said deposit will be forfeited to the landlord as liquidated damages.

(4) Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_  
If Yes than what \_\_\_\_\_

Have you ever been convicted of a misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_  
If Yes than what \_\_\_\_\_

**\*\*Failure to report a felony will result in automatic termination of lease\*\***

(5) If you require a pet for assisted living. You must bring in documentation stating that from a qualified agency along with this application.

(6) There is a non-refundable Application fee of \$25.00 due with application.

(7) We must have a copy of Driver's license and Social Security card at the time of application.

Name of nearest relative not living with you \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

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Make of Automobile

---

License Plate Number

---

Drivers License Number

---

e-mail address

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## BLACKWOOD APARTMENTS

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### Consent to Background and Reference Check

I authorize Blackwood Apartments to obtain information about me from my credit sources, current and previous landlords and employers and personal references. I authorize my credit sources, current and previous landlords and employers, and personal references to disclose to Blackwood Apartments such information about me as Blackwood Apartments may request.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\* NEED COPY OF DRIVERS LICENSE WITH APPLICATION \*\***

**\*\* ALL OCCUPANTS 18 AND OVER MUST FILL OUT INDIVIDUAL CONSENT FORM \*\***

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2960 BEACH ROAD, PORT HURON TWP, MI 48060 (810)310-0527 PHONE, (810)385-9909 FAX

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\* NEED COPY OF DRIVERS LICENSE WITH APPLICATION \*\***

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## QUALIFICATION

- 1) MONTHLY INCOME  
One person's monthly gross income shall be 3 ½ times the rental rate. Combining more than one income to satisfy the income requirement is not allowed.
- 2) LENGTH OF TIME ON THE JOB  
The guideline for length of time on the job is one year.
- 3) PAYMENT HISTORY  
Must have established credit demonstrating an ability to make timely payments. A credit report is used for this purpose.
- 4) RENTAL HISTORY (if available)  
We will obtain a rental history from your current landlord to insure that your rental payments were made in a timely fashion.
- 5) WE DO NOT ACCEPT CO-SIGNERS
- 6) MUST PASS CRIMINAL BACKGROUND CHECK

## **WHEN TURNING IN APPLICATION PLEASE INCLUDE:**

**Completed application**

**Completed release form, copy of drivers license and social security card for everyone 18 and over**

**Copy of the applicants last four check stubs**

**\$25.00 application fee**

**\*\* PLEASE NOTE YOU ARE APPLYING FOR A *SMOKE FREE* APARTMENT \*\***











