Warren Rentals 3128 Walton Blvd., Box 134 Rochester Hills, MI 48309 Office 248-766-1752 Kristashaw123@gmail.com

www.warrenrentals.net

We will have applications at each property and do charge a \$45 application fee PER PERSON. To submit an application, you will need to submit the following items:

- \$45 Application Fee(s)
- Copy of Driver License
- Copy of Paystubs

PETS: Pets are accepted with the following conditions:

- -Monthly rent will increase by \$50/Month PER PET
- -An additional \$300 PER PET Non-Refundable Fee is added to move in costs

SECURITY DEPOSIT: We charge one- and one-half months' rent.

MOVE IN COSTS:

Security Deposit + One Month Rent + \$150 Non-Refundable Cleaning Fee + \$300 Pet Fee PER Pet if Applicable

QUALIFICATIONS: To qualify for one of our properties you must have the following:

- Copy of Driver License
- -Completely Filled Out Application
- -Not Currently Being Evicted or Have Any Evictions on Record
- Provide Proof of Income (For Example: Copy of Most Recent Paystub)
- Get Utilities in Your Name
- Your monthly gross income (before taxes) must be 3 times the Monthly Rent of the Property $\,$

MOVE IN PROCESS:

Once you have gone through the application process above, Warren Rentals will contact you and let you know if you are a qualified applicant. If you are a qualified applicant and wish to rent the property, the following events are required:

- A \$500 NON-REFUNDABLE deposit is required. This deposit goes towards move in costs.
- A lease must be signed within 7 days of the date of the deposit, or the deposit will

be forfeited.

- DTE and Consumers Energy utilities must be put in your name for the property. The confirmation numbers must be given to Warren Rentals prior to the scheduled lease signing/move in date or the deposit will be forfeited.
- If the tenant misses an agreed upon lease signing date or is 20 minutes past the scheduled appointment time and then the appointment will be considered missed. There is a \$75 missed appointment fee for any prescheduled appointment with Warren Rentals.

APPLICATION FEE: Must be paid before the application will be processed. The application fee can be paid using Zelle to "kristashaw123@gmail.com" or by going to any chase bank and depositing the fee in the Warren Rentals business account ending in 1030.

By signing below I acknowledge that I have read and agree to all of the above policies regarding becoming an applicant and possible tenant for any of Warren Rentals properties.

Signature	Date
Signature	Date
Signature	

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Application Fee of \$45.00/applicant

ADDRESS OF RENTAL PROPERTY	Y YOU ARE APPLYING	FOR		
Last Name:	First:		Middle:	
Date of Birth:	Driver's License #			
Social Security Number:	Phone:			
Alternative Phone:	E-Mail Address:			
Occupants: List every occupants name	, Date of Birth and their	relationship to th	ne applicant.	
Name		Date of Birth	Relationship	
How long do you plan on living in the	next rental home that me	eets your needs?		
Have you ever broken a lease?	Yes No			
Have you ever refused to pay rent for a	any reason?Yes_	No		
Have you ever been evicted or asked to	o leave? Yes	No		
Have you ever filed bankruptcy?	YesNo	_		
Have you ever been convicted of a crit	me? Yes N	No		
If Yes, Describe				
Do you give us permission to do a crim				
Do you currently have, or can you get	utilities in your name? _	Yes	_No	
If No. Dosoribo				

RESIDENCE HISTORY

Current Address:				
City	Zip Code			
Dates lived at this address:	Monthly Rent:			
Name of present landlord:	Phone:			
Address of present landlord:				
Reason for moving:	Is your rent current?			
Number of late payments at this address:	Amt of security deposit being held by landlord:			
Have you had any recurring problems with your	home or landlord?			
Do you have any pets?No	Type/Breed:			
Applicant's current employment status:				
Employed by:	Posi	tion		
Address:				
Phone:	Hours per week: _	Date of Hire:		
Position:	Monthly Gros	ss Income:		
Supervisors Name:	Phone Number	E-mail		
Applicant Additional Income; Verifiable sour	ces that you would l	ike considered.		
Additional Source:		Amount:		
Contact person:	Phone:	E-Mail		
How long have you been receiving this income?	Н	low long do you expect it to continue?		
Supervisors Name:	_ Phone Number	E-mail		
VEHICLES				
List the number of vehicles that will be at rental	property	-		
Make/Model/Year:		License Plate #		
Make/Model/Vear		License Plate #		

HISTORY/ASSETS/LOANS

Monthly Expenses: List

Creditor	Purpose of Loan	Monthly Payment	Balance	Current on Payr	ments?
	VID A CUID				
EMERGENCY CON					
	emergency that would preven st you with rent payments?	nt you from paying rent	t when it is du	e, is there a relative	, person, or
Emergency contact: _		Relationship		Phone:	
Address:		City:	S	tate: Zip:	
PERSONAL REFER	RENCES:				
Full Name:			Relatio	onship:	
Phone:	E-Mail_				
Full Name:			Relation	onship:	
Phone:	E-Mail				
Full Name:			Relation	onship:	
Phone:	E-Mail				
FINANCIAL INFOR	RMATION				
Bank	Account#		Type: _	Checking	Savings
Branch Location:					
ILLEGAL SUBSTAN	ICES / MEDICAL MARIJU	ANA			
1) Do you smoke mar	ijuana?Yes	_ No			

2) If answered yes to question one, do you have a medical marijuana license? ______Yes ______No

3) If answered yes to question two, do you plan on growing or selling marijuana at the rental property? YesNo	
4) Do you use, possess, store, sell or manufacture any illegal substances?Yes No	
5) Will any occupant or visitor to the said property have in their possession, use, or supply any illegal substances while inside the property or anywhere within/on the legal property description?YesNo	,
By signing this application, applicant represents that all of the information contained herein is true, complete, and authorizes the landlord to contact any and all references as well as to verify all information on this application. If any information is found to be false, the application will be rejected and will be sufficient for immediate eviction and los of deposit.	
Applicants' Signature: Date:	