APPLICATION FOR TENANCY											
Complex name: HARVARD PLACE APARTMENTS			Bldg & unit #:					Type of unit:			
Address:		City: RO	CHESTER HILLS				State: MI		ZIP: 48307		
Market rate: \$ EFT Disco					Pet(s)			TOTAL RENT \$	I		
Resident pays: Gas, incl. heat	•	Water		•		Garbag	e Fee \$				
Holding deposit: \$ Non-refu	pplicant): \$	То	tal paid with a	pp: \$		Per Ck	Cert Ck MO				
Application date:	Proposed I	ease beginning date:				Proposed lease ending date:					
NOTE: RENT TO COMMENCE NO LATER THAN BEGIN	NNING DATE OR DA	TE APARTME	ENT IS AVAILABLE, WH	ICHEVER	IS LATER						
Applicant Information											
Legal Name:							Date of birth:				
SSN:	Drivers license #	:	Cell Ph:					Work Ph:			
Email address:											
Current address:		City:				State:		ZIP:			
Own Rent	Monthly	payment or	rent:		il	How long?					
Current landlord Name/Mortgage Company:					Phone:						
Previous address:					State:	ZIP:					
Own Rent	Monthly	City: Monthly payment or rent:						How long?			
Previous landlord Name/Mortgage Company:		Phone:									
Davis and sufficiency #1.	Deletienskin				Dhana						
Personal reference #1:	Relationship	•			Phone:						
Address:					State: ZIP:						
Personal reference #2:	Relationship	:		Phone:							
Address:					State:		ZIP:				
Bank:	ss/Branch:				Phone:						
Bank contact:	Checki	ing acct #:			Savings acct #:						
Employment Information											
Current employer:			How lor	ng?							
Position:	Supervi				isor:						
Employer address:		City:				State:		ZIP:			
Phone:		E-mail:			Fax:						
Hourly Salary Commission	Other income per mor			ath: \$ Source:							
Previous employer (or college):	How long:			Position/Degree:							
Emergency Contact											
Name of a person not residing with you:	Ţ				Relationsl	nip:	Γ				
Address:	City:				State:	ZIP:					
Emergency Contact Phone #:											

	AP	PLI	CATI	ON	FOR TE	NA	NCY (c	ont.)			
Co-applicant Information												
Legal Name:									Date of birth:			
SSN:	Drivers license #:					Cell Ph:			Work Ph		:	
Email address:												
Current address:	Cit			City:	:				State:			ZIP:
Own Rent	Rent Monthly payment or rent:									How long?		
Current landlord Name/Mortgage Company:									Phone:			
Previous address:		City:							State:			ZIP:
Own Rent	М	Monthly payment or rent:								How long?		
Previous landlord Name/Mortgage Company: Phone:							Phone:					
Personal reference #1:				Relationship:				Phone:				
Address:	Address: City:								State:			ZIP:
Personal reference #2:				Relationship:					Phone:			
Address:	ress: City:				State:				State:	ute:		ZIP:
Bank: Address/Bran				nch: Phone:								
Checking acct #: Bank contact:						Savings acct #:						
Co-applicant Employment Information	1											
Current employer:								How lo	ng?			
Position:						Supervisor:						
Employer Address:				City:				State:			ZIP:	
Phone: E-mail:						Fax:						
Hourly Salary Commission	n M	onthly ir	/ income: \$				Other income per month: \$			Source:		
Previous employer (or college):						How long:			Position/Degree:			
Name of Those to Occupy Leased Pren	nises othe	er than	Applica	nt/Co	-applicant							
Name:						Age:				Relation:		
Name:						Age:				Relation:		
Name:						Age:				Relation:		
Name:						Age:				Relation:		
Name:						Age:				Relation:		
Applicant's and co-applicant's signature(s) attached below attests to the fact that applicant and/or co-applicant has provided all information truthfully and accurately and have read and agreed to all terms on this and the 2 nd page of the application. Applicant/co-applicant acknowledge and authorize landlord to request credit report, employment verification and/or banking confirmation.												
Signature of applicant:								Date:				
Signature of applicants							Date:					
Signature of co-applicant:							Date:					

APPLICATION FOR TENANCY

1. HOLDING DEPOSIT

No tenancy is created by the signing of this application. Until a lease is properly executed, all funds submitted with this application shall be regarded as holding funds and not as a security deposit.

2. APPROVAL

All applications are subject to approval by the Owner. Notification of acceptance or denial of application will be delivered in writing within 10 business days after the application date or sooner if possible. In the case of a denial, applicant will receive a full refund of all holding funds. The Owner reserves the right to deny application without stating a reason therefore.

3. BEGINNING DATE

This application is for the specific apartment indicated on the face of this application and upon acceptance, the said apartment will be reserved for the applicant and said apartment will be made available to applicant as of the proposed lease "beginning date" or as soon as the apartment becomes available, whichever is later. The Owner or his agents shall not be liable if the applicant is unable to enter into and occupy the premises on the date specified or for any reason not within the Owner's control, such as construction delays, the holding over by previous tenants, or for any other reason.

4. LEASE

Upon notification of acceptance from HARVARD PLACE APARTMENTS, the applicant agrees to sign a lease prepared according to the terms of this application and drawn on the standard form as used by HARVARD PLACE APARTMENTS. A copy of said lease form will be made available to applicant for review, upon request, prior to the move-in date.

5. RULES AND REGULATIONS

Applicant recognizes that all facilities are for the exclusive use of the Residents of the complex and if accepted as a Resident, agrees to abide by the terms of the lease to be signed, included all rules and regulations which may be part of the lease or are set forth by the Owner as necessary, including those dealing with all common areas and facilities. A copy of said rules and regulations will be made available to applicant for review, upon request, prior to the move-in date.

6. RENTAL PAYMENTS

Applicant agrees that the full monthly rent will be paid on or before the first day of each month as stated in the lease including the last month of occupancy.

7. CANCELLATION PROCEDURE

Applications may be cancelled within 7 days of the date of the approval of the application. Notice of cancellation must be received in writing at HARVARD PLACE APARTMENTS, Rental Office, 1090 Academy Dr, Rochester Hills, MI 48306, not later than 7 days from approval of this application. Applicant will receive, no later than 30 days following the receipt of cancellation, a refund of all holding funds paid with this application. Application cancelled after 7 days of application approval will forfeit their \$250 holding deposit.

8. THE AGREEMENT

Applicant understands that this application contains the entire agreement between the parties. There are no understandings, promises, or agreements between the parties other than those contained herein. The agreement may not be amended except in writing signed by all the parties hereto.

Applicant Signature:	Date:
Co-applicant Signature:	Date:
Leasing Agent Signature:	Date:

