

**Parkside Apartments, llc**  
**810 W. Huron**  
**Ann Arbor, Michigan 48103**  
**Phone: 734-821-0276**  
**E-Mail: ParksideApartments@hotmail.com**

**APPLICATION FOR RENTAL**

Date: \_\_\_\_\_ E-Mail address \_\_\_\_\_  
Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_  
Drivers License No \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Gross Monthly Income \_\_\_\_\_  
Present Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Present Lessor \_\_\_\_\_ Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Previous Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Previous Lessor \_\_\_\_\_ Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Number of Occupants \_\_\_\_\_  
Closest Relative not residing with applicant: \_\_\_\_\_  
Relationship \_\_\_\_\_ Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

**The Applicant hereby certifies that he/she is of legal age and that all statements made above are true and no misrepresentation has been made. The Lessor reserves the right to cancel any lease entered into if any untrue statements or misrepresentations are discovered.**

**Possession of the premises is not guaranteed until Lessor deems the apartment ready for occupancy. The Lessor shall not be liable to Lessee for any delay in possession of the premises due to causes beyond its direct control.**

**By signing below I authorize any agent acting on behalf of the apartment community to obtain any and all background information on me including but not limited to a credit check and a criminal records check.**

**A non-refundable application fee of \$30.00 shall be submitted with this form. This will be applied to the security deposit upon acceptance.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**