

3310 PACKARD APT 3A ANN ARBOR, MI 48108 734-973-7368 office@allmandproperties.com

Student Application

Date	Apt/ Address #
	Security Deposit \$
Date Rent Is To Start	Application Fee \$50
Term of Lease	Less Deposit Made \$
Name	Email:
Social Security No.	Phone Number
	Date of Birth
Present Address	City
Present Rental Rate	Present Landlord Phone
Reason for leaving	Phone
Previous landlord	CityPhone
Car Make and Model	Plate
	Phone Number
Address	City and Zip
What will be the source of your re	ital payments?
	If so, what kind?
The following names are to occup	said apartment (name and age)
conditions of the Landlord's lease (w	lease the unit described in this application and to accept the rules and othe ich is available for inspection.) \$ If I/We FAIL TO EXECUTE the lease by
	SHALL BE RETAINED by the Landlord or Landlord's agen application and re-renting the unit as liquidated damages. If I/We execute the lited to the security deposit. Landlord reserves the right not to approve this
	Agent shall rely up all information supplied herein in the event the Landlord o . Each undersigned guarantees such information to be correct and true to the
PREMISES TO BE IN ACCEPT CONDITION OF THE BLIND FURNISHINGS. LANDLORD A APPLICANT AT THE COMME	OGES THAT HE/SHE HAS VIEWED THE PREMISES AND FINDS SAID ABLE CONDITION AS IS, INCLUDING, BUT NOT LIMITED TO, THE S, CARPET, PAINTING AND DECORATION, FURNITURE AND GREES THAT THE PREMISES WILL BE TURNED OVER TO THE NCTMENT OF APPLICANT'S TENANCY IN A LIKE CONDITION AR ACCEPTED. (APARTMENT WILL BE CLEAN UPON MOVE-IND SIGN A CLEANING WAIVER.
Dated	, Signature