



ALLEN PLACE 'Market Rate' Rental Application

Please complete this application and return with a \$30 check or money order per adult to the Allen Place apartments, C/O Kim Fehrenbach, 11893 Lillian Lee Dr., Interlochen, MI 49643. Checks should be made out to: Michigan Asset Group. If you prefer, you may drop your application off at Allen Neighborhood Center, Attention: Joan.

If you are not certain whether you qualify for 'market rate', please call Kim at 517-897-5556 for guidance.

Thank you!

Preliminary Rental Application Tax Credit/Section 42 Financed Properties

Please note that this is a preliminary application and gives no lease or rent rights.

Community: Allen Place Office Phone: _____ Date: _____

Unit Size 1 bedroom 2 bedroom 3 bedroom Unit Type: Apartment House

Would you or a member of your household benefit from the design features of a barrier free unit? **Yes** or **No**

Applicant: _____ Email _____ Phone () _____

Co-Applicant: _____ Email _____ Phone () _____

Applicant's History	
Applicant:	Co-Applicant
<p>Current Address: _____</p> <p>Date: From _____ Rent: \$ _____</p> <p>To: _____</p> <p>Reason for Moving: _____</p> <p>Current Landlord: _____</p> <p>Address: _____</p> <p>Phone _____</p>	<p>Current Address: _____</p> <p>Date: From _____ Rent: \$ _____</p> <p>To: _____</p> <p>Reason for Moving: _____</p> <p>Current Landlord: _____</p> <p>Address: _____</p> <p>Phone _____</p>

<p>Previous Address: _____</p> <p>Date: From _____ Rent: \$ _____</p> <p>To: _____</p> <p>Reason for Moving: _____</p> <p>Previous Landlord: _____</p> <p>Address: _____</p> <p>Phone _____</p>	<p>Previous Address: _____</p> <p>Date: From _____ Rent: \$ _____</p> <p>To: _____</p> <p>Reason for Moving: _____</p> <p>Previous Landlord: _____</p> <p>Address: _____</p> <p>Phone _____</p>
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<p>Previous Address: _____</p> <p>Date: From _____ Rent: \$ _____</p> <p>To: _____</p> <p>Reason for Moving: _____</p> <p>Previous Landlord: _____</p> <p>Address: _____</p> <p>Phone _____</p>	<p>Previous Address: _____</p> <p>Date: From _____ Rent: \$ _____</p> <p>To: _____</p> <p>Reason for Moving: _____</p> <p>Previous Landlord: _____</p> <p>Address: _____</p> <p>Phone _____</p>
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If you have resided at additional addresses within the past five (5) years, please attach Previous Address Information on a separate sheet.

The information contained in this application is treated confidentially. No information will be revealed to anyone without the express written consent of the applicant.

Head of Household Date

Co-Applicant, Spouse/Co-Head Date



We pledge not to discriminate against applicant based on their race, color, sex, age, religion, national origin, familial status or disability.

TDD 1-800-649-3777



Please list all persons that will occupy the residence.

Name (First, Middle Initial, Last)	Maiden Name (If Applicable)	Date of Birth	Relationship of Head Of Household	Social Security Number
1.			Head of Household	
2.				
3.				
4.				
5.				
6.				

Employment

Applicant	Co-Applicant
Employer: _____	Employer: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Length of Employment: _____	Length of Employment: _____
Position Held: _____	Position Held: _____
Salary/Wage: _____ Per: _____	Salary/Wage: _____ Per: _____
Supervisor: _____	Supervisor: _____
Status: _____ Full-Time: _____ Part-Time: _____	Status: _____ Full-Time: _____ Part-Time: _____
List average hours per week worked: _____	List average hours per week worked: _____

Total household income from all other sources (i.e. social security pension, child support, Section 8 Certificate, etc):

Source: _____	Amount: \$ _____
Source: _____	Amount: \$ _____
Source: _____	Amount: \$ _____

Do you or any member of your household engage in current illegal use or illegal distribution of a controlled substance or have you previously been convicted of the same? **Yes** or **No**

If you answered "yes" to the above question, have you successfully completed a controlled substance abuse program or are you presently enrolled in such a program? **Yes** or **No**

If "yes", please explain: _____

Have you ever been convicted of a crime, felony, misdemeanor? **Yes** or **No**

If "yes", please explain: _____

Provide asset information below:

Type of Assets	Name of Bank, Stock or Bond	Account Number	Balance/ Current Value	Rate of Interest	Dividend	Real Estate
1.						
2.						
3.						
4.						
5.						

Have you disposed of any assets in the last two years? **Yes** or **No**

If "yes", please list asset and value received: _____

Head of Household

Date

Co-Applicant, Spouse/Co-Head

Date



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Do you own a car? _____ Model/Year _____ License # _____

Do you own a second car? _____ Model/Year _____ License # _____

Are you a full-time student? **Yes** or **No**

Are any members of your household full-time students? **Yes** or **No**

Have you or any member of your household lived in subsidized housing? **Yes** or **No**

If "yes", when and where? _____

Have you ever committed fraud in a subsidized housing program or been requested to repay money for knowingly misrepresenting information for such housing programs? **Yes** or **No**

If "yes", please explain: _____

PERSONAL REFERENCES: List 3 RELATIVES we can call for a personal reference:			
Name	Address/City/Zip	Relationship	Telephone Number
1.			
2.			
3.			

Head of Household Date Co-Applicant, Spouse/Co-Head Date

Applicant's certification that the unit applied for will be the applicant household's permanent residence and it does/will not maintain a separate subsidized rental unit in a different location.

Applicants Initials Co-Applicants Initials Managers Initials

HUD, RURAL DEVELOPMENT & MSHDA APPLICANTS

I fully understand that Title 18, Section 1001 of the United States Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the United States. I therefore, certify that the foregoing information is true and complete to the best of my knowledge. I authorize inquiries to be made to verify the statements above. Falsified statements shall be grounds for eviction.

Applicants Initials Co-Applicants Initials Managers Initials

RURAL DEVELOPMENT

I/We certify that the rental unit which I/We will occupy will be my/our permanent residence and further certify that I/We do not and will not maintain a separate subsidized rental unit in a different location. I acknowledge that I am responsible to inform the office of any changes to any part of this application (i.e. address, phone, income).

Applicants Initials Co-Applicants Initials Managers Initials

GENDER DESIGNATION: (Applicant) I do not wish to furnish this information
 Male Female

GENDER DESIGNATION: (Co-Applicant) I do not wish to furnish this information
 Male Female

Additional information will be required at a later date to complete the processing for residency.

Head of Household Date Co-Applicant, Spouse/Co-Head Date



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DISCLOSURE UNDER FAIR HOUSING REPORTING ACT AND AUTHORIZATION

Michigan Asset Group, LLC. Is requesting a copy of your Consumer Report or Credit Report to assist it in its consideration for:

Housing at Allen Place

We are required as part of our screening process to secure a Consumer Report on you to assist us in our determination. Under the Fair Credit Reporting Act, 15 U.S.C.A. 1681 et seq. we must first seek your written consent to obtain your consumer or credit report. The information obtained will not be used in violation of any applicable Federal or State law.

Pursuant to the Fair Credit Reporting Act, 15 U.S.C.A. 1681a the following definitions are provided to you:

“Consumer” means an individual.

“Consumer Report” means any written, oral, or other communication of any information by a consumer reporting agency bearing on a consumer’s credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing the consumer’s eligibility for a) credit or insurance to be used primarily for personal, family, or household purposes; b) employment purposes; or c) any other purpose authorized in the act.

“Investigative Consumer Report” means a consumer report or portion thereof in which information on a consumer’s character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, or associates of the consumer reported on or with others with whom he is acquainted or who may have knowledge concerning any such items of information.

“Employment Purposes” means a report for the purpose of evaluating a consumer for employment, promotion, reassignment or retention as an employee.

“Adverse Action” means (i) a denial of employment or any other decision for employment purposes that adversely affects any current or prospective employee; (ii) a denial or cancellation of, an increase in any charge for, or any other adverse or unfavorable change in the terms of credit or any license or other reasons described in section 168b(a)(3)(D) of the Act; or (iii) an action or determination that is made in connection with an application that was made by, or a transaction that was initiated by, any consumer, or in connection with a review of an account under the act and adverse to the interests of the consumer.

In accordance with the company policy we must obtain your consent in writing authorizing us to obtain a “Consumer Report” and/or Investigative Report on you for **employment** purposes. Upon receipt of your written authorization, we will obtain the written report. If we consider any information in that report which directly and adversely affects you in our employment related decision, you will be provided with a copy of the Consumer Report and a summary of your rights under the FCRA before a decision is final. Alternatively, you may contact the Federal Trade Commission about your rights under the Fair Credit Reporting Act.

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If we are obtaining a "Credit Report" with respect to your application for **housing**, and should your application be rejected due to information contained on your credit report you will be provided with the name and address of the local credit bureau where within sixty (60) days of rejection, you can obtain a free copy of your credit report, dispute it's accuracy, and provide a consumer statement describing your position if you dispute the credit report. Pursuant to the Fair Debt Credit Reporting Act you will have the right to put into your report a statement explaining your position on the item under dispute. For further information, contact your State or Local consumer protection agency or your State Attorney General's office.

I have read the foregoing information referred to as a Fair Credit Reporting Disclosure and now hereby authorize Allen Place to obtain a Consumer Report, Credit Report or Investigative Report on me from a consumer reporting agency or company for:

Housing purposes

I understand that Michigan Asset Group, LLC., and/or the Apartment Community referenced above will rely upon the information contained in the report. I further understand that I have rights to dispute any adverse decision which may be made against me by I understand that Michigan Asset Group, LLC., and/or the Apartment Community as set forth in the disclosure that I may seek additional advice or assistance from my local consumer protection agency or Attorney General's office.

I acknowledge that I have received a copy of this document for my records.

Applicant

Date

Co-Applicant

Date

Witness

Date



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NOTICE AND CONSENT FOR THE RELEASE OF INFORMATION

Property Name Requesting Information:

Allen Place

By signing this consent form, I am authorizing the above-referenced housing community for which I am applying to obtain information from a third party about me. I understand that the purpose of this information is to determine my eligibility for housing assistance. I understand that this information can include and is not limited to information regarding my income, assets and credit bureau report which may affect my eligibility.

I further understand that income information obtained from these sources will be verified according to the initial information, which I have provided on my original application for housing.

Who Must Sign the Consent Form

Each member of your household who is 18 years of age or older must sign the relevant consent forms at the initial certification and at each recertification, if applicable. In addition, when new adult members join the household and when members of the household become 18 years of age, they must also sign the relevant consent forms.

Signatures:

_____ Head of Household	_____ Date
_____ Co-Applicant	_____ Date
_____ Other Family Member over age 18	_____ Date
_____ Other Family Member over age 18	_____ Date



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AUTHORIZATION FOR CRIMINAL HISTORY CHECK

NOTICE TO APPLICANTS: The information requested below is for the sole purpose of conducting a background investigation, which includes, among other things, a criminal conviction check. The existence of a prior criminal conviction will not necessarily make you ineligible for housing with Michigan Asset Group, LLC. It is Michigan Asset Group's policy to evaluate any adverse information obtained in the background investigation based on a range of factors including, but not limited to, rental history. Information regarding age, sex and race will not be a factor in any housing decision including.

Full Name *(no nicknames)* _____

Maiden Names(s), Nickname(s), Other Name(s) *(please include dates used)* _____ **Male** **Female**

Social Security Number _____ **Date of Birth** _____

Driver's License Number _____ **State** _____

Is Your Driver's License Valid? **Yes** **No** ⇨ *Please give details*

All addresses for the last 7 years: *(Street / City / County / State / Years From-To)*

In the event you do not remember the exact street address, please include a city, state and the approximate dates of residence.

	Street Address	City	County	State	Years From-To
1.	_____ / _____ / _____ / _____ / _____				
2.	_____ / _____ / _____ / _____ / _____				
3.	_____ / _____ / _____ / _____ / _____				
4.	_____ / _____ / _____ / _____ / _____				

(Attach additional pages if necessary)

I expressly authorize all personnel, schools, companies, corporations, credit bureaus and law enforcement agencies to supply any and all information concerning my qualifications for employment positions applied for and the information given by me herein. In consideration for being considered for housing, I release Michigan Asset Group, related entities, as well as any individual or entity providing information, from any and all liability in connection with any inquiries and investigations made, information they give and any decisions made or action taken concerning my employment based on such information. I also do not require a copy of any disclosure of the nature and scope of the investigation. I understand that any offer of apartment rental from Michigan Asset Group is based upon my successful completion of the background screening. I also understand that I have a right to review all disputed information and to follow up with the law enforcement agency to clear up any discrepancies. This authorization is good for one year from the date of signing.

X _____ **Signature** _____ **Date** _____



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Full Name *(no nicknames)* _____

Maiden Names(s), Nickname(s), Other Name(s) *(please include dates used)* _____ **Male** **Female**

Social Security Number _____ **Date of Birth** _____

Driver's License Number _____ **State** _____

Is Your Driver's License Valid? **Yes** **No** ⇨ *Please give details*

All addresses for the last 7 years: *(Street / City / County / State / Years From-To)*

In the event you do not remember the exact street address, please include a city, state and the approximate dates of residence.

	Street Address	City	County	State	Years From-To
1.	_____ / _____ / _____ / _____ / _____				
2.	_____ / _____ / _____ / _____ / _____				
3.	_____ / _____ / _____ / _____ / _____				
4.	_____ / _____ / _____ / _____ / _____				

(Attach additional pages if necessary)

I expressly authorize all personnel, schools, companies, corporations, credit bureaus and law enforcement agencies to supply any and all information concerning my qualifications for employment positions applied for and the information given by me herein. In consideration for being considered for housing, I release Michigan Asset Group, related entities, as well as any individual or entity providing information, from any and all liability in connection with any inquiries and investigations made, information they give and any decisions made or action taken concerning my employment based on such information. I also do not require a copy of any disclosure of the nature and scope of the investigation. I understand that any offer of apartment rental from Michigan Asset Group is based upon my successful completion of the background screening. I also understand that I have a right to review all disputed information and to follow up with the law enforcement agency to clear up any discrepancies. This authorization is good for one year from the date of signing.

X _____ **Signature** _____ **Date** _____



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RENTAL HISTORY VERIFICATION

I authorize Allen Place to obtain information on my rental history by contacting any references necessary to evaluate renting risks. I hereby release all references to give Waverly Place all requested information.

Signature _____ Date _____

Applicant Name _____ Date _____

Address to be Verified _____

Name of Landlord: _____

() Current Landlord () Previous Landlord () Other _____

Dates of Applicants Residency: From _____ To _____

1. Rent Payment

- A. Is/Was applicant current on rent? _____
- B. Has/Had he/she ever been late? _____ How late? _____ How Often? _____
- C. Have/Had you ever begun eviction proceedings for non-payment? _____
- D. Monthly Rental Rate? _____

2. Caring for the Apartment

- A. Does/Did the applicant keep the apartment clean? _____
- B. Has/Had the applicant damaged the apartment? _____
If yes, describe _____
- C. Has/Had the applicant paid for the damage? _____
- D. Will/Did you keep any of the security deposit? _____

3. General

- A. Did the applicant give a 30 day notice to vacate? _____
- B. Does/Did the applicant permit persons other than those on the lease to live in the apartment? _____
- C. Has/Had the applicant or family members damaged or vandalized the common areas? _____
- D. Does/Did the applicant create any physical hazards to the project or residents? _____
- E. Does/Did the applicant interfere with the rights and quiet enjoyment of other residents? _____
- F. Did the applicant give you any false information? Describe _____

- G. Would you re-admit this applicant? _____
If no, why not? _____

Check One:

- _____ Verified by Telephone
- _____ Completed by Previous Landlord

Landlord or Signature of Person Completing this Form _____
Date _____



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