

LAKESHORE PROPERTY MANAGEMENT

Residential Lease Application

Address Applying For: _____

Occupant Name: _____

Present Address: _____ Cell #: _____

City, State, Zip: _____

Email: _____

Previous Address: _____

City, State, Zip: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ Monthly Salary: _____

Emergency Contact: _____

Address: _____ Phone #: _____

City, State, Zip: _____

Previous Landlord: _____ Phone #: _____

Other Occupants: _____

Occupant's Place of Employment: _____

Name: _____ Phone #: _____

Address: _____

Occupants Automobiles: _____

Year: _____ Make: _____ Model: _____ Tag Number _____

References: (Name, Address and Phone Number)

I understand that is not a contract and does not bind either party. The above information is correct to the best of my knowledge and I hereby authorize Lakeshore Realty, Inc. to confirm my employment, previous landlords, and credit references. I hereby certify that I am of legal age (18 or older). Lakeshore Property Management has my permission to process a credit report for their review.

Tenant

Tenant

Referred by: _____ Phone #: _____