RENTAL APPLICATION - Equal Housing Opportunity

LEASE TELL I	US ABOUT YOUR	SELF							
*Full Name					*Phone ()				
				Date of Birth					
				Names of Dependents					
					rs old, what are their ages				
				_	ity No				
		onging to other occu							
Make	Mode	I Co	lor	Year	License Plate				
		STORY (LAST 3 YEA	-			_			
				Apt#	City	State	Zip		
Month/Year Moved In									
andlords nam	e:				Phone ()				
Previous Addre	ss (last 3 years)_					Rent \$			
andlords nam	e:				Phone ()				
PLEASE DESCI	RIBE YOUR CREE	DIT HISTORY							
-		n the past seven (7)	years?		•	ou ever been evicted from a rental residence?			
'es	No			Yes	No				
PLEASE PROVI	IDE YOUR EMPLO	OYMENT INFORMAT	ION						
		Part Time	-	-					
		Employed as							
ale employed	<u> </u>		[111]	oloyeu as					
	OUR REFERENC								
		Address Relationship				ov known you?			
HUHG		nelal	υιιοιιιμ		now long have tile	y KIIOWII YUU!			
	Address								
Dhana					How long have they known you?				

Date:_____

^{*} Rental application cannot be processed without this information.

Where may we	reach you to discuss this applica	tion?		
Day Phone # ()	Night Phone # ()	
THE TELEPHONE N PROPERTY VS. THE SPONSES WHEN N	E TO BE TRUE AND CORRECT. I GIVE MY IUMBERS I PROVIDED. I UNDERSTAND TI E NUMBER OF PROSPECTIVE TENANTS, I MAKING A DECISION FOR A TENANT. I FUI INTHS RENT AND A SECURITY DEPOSIT (HAT THE LANDLORD FINANCIAL CAPABILI RTHER UNDERSTAND	MUST TAKE INT TIES, PETS, CREI THAT I AM REQ	O CONSIDERATION THE SIZE OF THE DIT AND PERSONAL REFERENCE RE- UIRED TO SIGN A ONE-YEAR LEASE,
Signed: X	Name of Applicant	Dat		-
Signed: X	Name of Applicant	Dat	e	

To expedite processing of rental application, please fax to 216-781-5004, or mail to:

myMBcondo (7504 Porcher) c/o Knudsen, Gardner & Howe, Inc. 2103 St. Clair Avenue Cleveland, Ohio 44114

Questions? Call 216-235-2597 or e-mail info@myMBcondo.com.