



PARAGON PROPERTIES

A Property Management Company

Thank you for your interest in a Paragon Properties managed apartment community. Upon completion of the Online Application Agreement, please fax to the community of interest listed below. Be sure to include a telephone number or e-mail where you can be reached.

DOVER HILLS APARTMENTS 4520 Dover Hills Drive Kalamazoo, MI 49009 FAX: (269) 372-8226 PHONE: (269) 372-0400	PARK LANE APARTMENTS 23344 Park Place Drive Southfield, MI 48034 FAX: (248) 355-5761 PHONE: (248) 355-0770
DRAWBRIDGE APARTMENTS 36420 Union Lake Road Harrison Township, MI 48045 FAX: (586) 791-5004 PHONE: (586) 791-7100	SPRINGPORT GLEN APARTMENTS 2951 Pheasant Run Dr., Apt. A Jackson, MI 49202 FAX: (517) 784-7391 PHONE: (517) 784-8901
EASTWOOD VILLAGE APARTMENTS 24382 Eastwood Village Court Clinton Township, MI 48035 FAX: (586) 792-0790 PHONE: (586) 792-0200	PRENTISS POINTE APARTMENTS 39111 Prentiss Road Harrison Twp., MI 48045 FAX: (586) 465-4499 PHONE: (586) 465-4700
FRANKLIN RIVER APARTMENTS 28733 Franklin River Drive Southfield, MI 48034 FAX: (248) 355-4808 PHONE: (248) 356-0400	THREE OAKS APARTMENTS 4140 Three Oaks Boulevard #1A Troy, MI 48098-4525 FAX: (248) 362-2326 PHONE: (248) 362-4088
KNOTTINGHAM APARTMENTS 23128 Wellington Crescent Clinton Township, MI 48036 FAX: (586) 463-0239 PHONE: (586) 463-0200	WESTWOOD VILLAGE APARTMENTS 37830 Westwood Circle Westland, MI 48185 FAX: (734) 459-6928 PHONE: (734) 459-6600
LAKESIDE VILLAGE APARTMENTS 15770 Lakeside Village Drive Clinton Township, MI 48038 FAX: (586) 263-3737 PHONE: (586) 263-8900	WOODLAND VILLA APARTMENTS 7360 Drew Circle #9 Westland, MI 48185 FAX: (734) 422-5491 PHONE: (734) 422-5411

Application Agreement



Property _____ App Date _____ Move in Date _____
 Lease Term From _____ To _____ Rental Rate \$ _____
 Apt Address _____ Apt # _____ City _____ St _____ Zip _____
 Apt Style _____ App Taken By _____

Last Name _____ Maiden Name _____
 First Name _____ - Middle Initial _____
 Social Security # _____
 Birth Date -- Month _____ Day _____ Year _____
 Driver's License # _____
 Personal Identification # _____
 Home Phone (_____) _____
 Work Phone (_____) _____
 Cell Phone (_____) _____
 Email _____
 Address _____ Apt _____
 City _____ State _____ Zip _____
 Everyone 18 years and older must complete an Application.
 Rent is due on the first (1st) day of the month pursuant to lease.
 Renter's insurance is required for living at this community.
 Advertising Source: _____

Reservation Deposit _____
 Application Fee (non-refundable) _____
 Monthly Rental Rate (if M/I after 15th of month) _____
 Rental Prorate _____
 Monthly Parking/Storage Fee _____
 Parking/Storage Prorate _____
 Monthly Water Fee _____
 Water Prorate _____
 Monthly Pet Fee _____
 Pet Prorate _____
 Security Deposit* _____
 Pet Deposit _____
 Rent Concession _____
Total Due _____
 Less Amount Rec'd (App Fee/Res Deposit) _____
Balance Due at Move In _____

Pet No ___ Yes ___ Type _____ Breed _____ Age _____
 Color _____ Weight _____ Name _____
 Pets must be approved by Management prior to occupying apartment.

*Security Deposit subject to change based on qualifying criteria.
 All move-in monies must be in the form of cashier's check / money order, and due at the signing of the lease, prior to possession of the unit.

Total # of occupants _____ (include applicant on 1st line below)
 Name _____ SS# _____ State _____ Birth Date _____ Relationship SELF _____
 Name _____ SS# _____ State _____ Birth Date _____ Relationship _____
 Name _____ SS# _____ State _____ Birth Date _____ Relationship _____
 Name _____ SS# _____ State _____ Birth Date _____ Relationship _____

Within the past three (3) years have you:
 1. Declared Bankruptcy? No ___ Yes ___ Date _____
 2. Been evicted? No ___ Yes ___ Date _____
 3. NOT fulfilled a lease term? No ___ Yes ___ Date _____ Reason for 2 or 3 If yes: _____

Current Landlord Name _____ Phone (_____) _____ Move In Date _____
 Address _____ City _____ State _____ Zip _____ Monthly Payment \$ _____
 Home Owner ___ Renting ___ Living w/Family ___ Are you presently in a lease? No ___ Yes ___ Lease Exp Date _____

If above is less than three (3) years:
 Previous Landlord Name _____ Phone (_____) _____ Move In Date _____
 Address _____ City _____ State _____ Zip _____ Monthly Payment \$ _____ Lease Term _____

Employer _____ Occupation _____
 Address _____ City _____ State _____ Zip _____
 Date of Hire _____ Annual Income _____
 Supervisor _____ Phone (_____) _____

Bank/Routing # _____
 Checking # _____
 Savings # _____
 Rent payment through auto debit: Y N

If less than one (1) year:
 Previous Employer _____ Occupation _____
 Address _____ City _____ State _____ Zip _____
 Dates of Employment _____
 Supervisor _____ Phone (_____) _____

Additional income or assets which can be verified
 \$ _____ Type _____
 \$ _____ Type _____

Automobile Information Make _____ Model _____ Color _____ License _____
 Make _____ Model _____ Color _____ License _____

Emergency Contact Name _____ Phone (_____) _____ Relationship _____
 Address _____ City _____ State _____ Zip _____
 Emergency Contact Name _____ Phone (_____) _____ Relationship _____
 Address _____ City _____ State _____ Zip _____

- Have you ever been convicted of or plead guilty to a felony? Yes ___ No ___
 - Have you ever been convicted of or plead guilty to a misdemeanor involving sexual misconduct? Yes ___ No ___ (A response of Yes to either questions #1 or #2 is an automatic denial.)
 - I declare that all responses are true and complete. False information supplied in this application agreement will be sufficient grounds for termination of the lease.
 - I hereby authorize Paragon Properties Company to verify all foregoing information including, but not limited to, credit reports and criminal background checks.
 - It is agreed, a facsimile signature shall stand in place of and instead of applicant's original signature.
- No tenancy is created by this Application nor until a lease in form satisfactory to Owner is duly executed by Owner and tenant.
 -Reservation Deposit is refundable if Application is denied, or if unit not available for wait list reservation. A refund check will be issued within 30 days.

Applicant Signature _____ Date _____ By Witness _____ Date _____

PROPERTY MANAGER
 Credit Report Obtained? Y N If No, reason: _____
 Circle One: Approved Denied Cancelled If Denied/Cancelled, reason: _____
 Comments/Concession Detail: _____
 PM Initials: _____ Date: _____