

We are actively working with other landlords and neighbors in the area to maintain our rental properties as favorable, decent, drug free neighbors. We have instituted a thorough screening process to help us achieve this goal. We are looking for tenants that will help facilitate this at our properties. Please review the following criteria. If you feel you qualify, please complete the attached application and return it us with the \$25 non-refundable application fee (check or money order only)

We do not discriminate based on race, color, religion, sex handicap, national origin, or familial status.

The following criteria will be used in screening applicants for rentals.

1. The application must be filled out completely by all adults 18 years of age or older.
2. Rental history from unbiased sources (not relatives) will be reviewed. If you do not have at least two previous landlords, we may require a qualified co-signer on your lease or an additional security deposit. It is your responsibility to provide us with the information necessary to contact you previous landlords. We reserve the right to deny your application if after making a good faith effort, we are unable to verify your rental history. If you previously owned your own home, please furnish mortgage company references.
3. Income will be verified as to the amount and stability of your income. (For example, through pay stubs, employer contact or tax records).
4. Two pieces of Identification must be shown. These would include a photo ID (such as a driver's license) and a second piece of ID. Present these with your completed application.
5. If you misrepresent any information on the application, you will be denied rental.
6. A credit report will be ordered for each adult applicant. A poor credit record may result in denial of your application.
7. We have the right to contact the proper authorities to determine if you have a criminal record pertaining to any type of crime that would be considered a serious threat to real property or to the other residents' peaceful enjoyment of the premises, including the manufacture or distribution of controlled substances. Have you ever previously been convicted or plead guilty to an offense for production or manufacture or distribution of controlled substances prohibited by law.  
YES or NO                      YES or NO (Please circle) indicate for each applicant.
8. Have you ever previously been convicted or plead guilty to any physical assault or violent act or any sexual misconduct including, but not limited to child molestation, rape, incest or child pornography?  
YES or NO                      YES or NO (Please circle) indicate for each applicant.
9. We will accept the first qualified applicant for each respective vacant unit.

I/we hereby make application and certify that the above information is correct. I authorize you to contact any references that I have listed and perform a credit check.

_____ Applicant	_____ Date	_____ Applicant	_____ Date
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LONG BEACH COVE LUXURY VILLAS  
1000 LONG BEACH LANE, MICHIGAN CITY, IN 46360  
Phone: 219-879-9950 Fax 219-879-9951  
Corporate Office For property Management& Maintenance LLC:  
1906 N. Oak Road, Plymouth, IN 46563  
Phone: 574-936-4487 Fax 574-936-4768

Please complete in Full

Referred By: \_\_\_\_\_

**Rental Application**

Applicant: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ Social Security No. \_\_\_\_\_

MaidenName/Aliases \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone: \_\_\_\_\_ How Long at Above \_\_\_\_\_ Own \_\_\_\_\_ Rent \_\_\_\_\_ Other \_\_\_\_\_

Reason for moving: \_\_\_\_\_

Current Landlord: \_\_\_\_\_ Address: \_\_\_\_\_

May we contact them: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous Address: \_\_\_\_\_

How Long at Above \_\_\_\_\_ Own \_\_\_\_\_ Rent \_\_\_\_\_ Other \_\_\_\_\_

Reason for moving: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Address: \_\_\_\_\_

May we contact them: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicants Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Applicants Position: \_\_\_\_\_

Length of time employed: \_\_\_\_\_ Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Hours: \_\_\_\_\_

Co-Applicants Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Applicants Position: \_\_\_\_\_

Length of time employed: \_\_\_\_\_ Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Hours: \_\_\_\_\_

Any additional income for consideration: \_\_\_\_\_

Unit you are applying for: \_\_\_\_\_

How many people will be living in the unit? \_\_\_\_\_

Their names, Dates of birth, & Relationships: \_\_\_\_\_

Vehicle(s), Make, Model, Year: \_\_\_\_\_

Date you wish to move in: \_\_\_\_\_

Do you have pets? \_\_\_\_\_ What type? \_\_\_\_\_

Name of nearest relative not living with you: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Bank: \_\_\_\_\_ Checking or Savings \_\_\_\_\_

Type of Reference: \_\_\_\_\_ Type of Reference: \_\_\_\_\_

Address: \_\_\_\_\_

**I/We hereby make application and certify that the above is correct. I authorize you to contact my references that I have listed and run a credit check and criminal background check.**

Signature \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**APPLICANT 1**

FULL NAME \_\_\_\_\_  
DRIVERS LICENSE NUMBER \_\_\_\_\_  
STATE \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_  
STATE \_\_\_\_\_  
ZIP CODE \_\_\_\_\_  
EXPIRATION DATE \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SIGNATURE \_\_\_\_\_

**APPLICANT 2**

FULL NAME \_\_\_\_\_  
DRIVERS LICENSE NUMBER \_\_\_\_\_  
STATE \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_  
STATE \_\_\_\_\_  
ZIP CODE \_\_\_\_\_  
EXPIRATION DATE \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SIGNATURE \_\_\_\_\_