

Leasing Consultant _____
Apt. Number _____
Rental Rate _____
Move In Date _____
Approved - Yes _____ No _____

Application Instructions
Please **Print** this file then **completely fill it out** and **mail it** along with your check for the **\$30.00** application fee to the address at the left.

Coopers Landing Apartments

5001 Cooper's Landing RD.
Kalamazoo, MI 49004

Legal Name: Last _____ First _____ Middle _____
Current Address _____ City _____ State _____ Zip _____
Former Address _____ City _____ State _____ Zip _____
E-mail Address _____ Phone # _____ Birth Date _____

Driver's License # _____ Social Security Number _____
Auto #1 Make & Year _____ Color _____ License Plate # _____
Auto #2 Make & Year _____ Color _____ License Plate # _____

Current Landlord/ Mortgage Holder _____ Phone # _____
Landlord Address _____ Dates of Occupancy _____
Rental Rate/Mortgage Payment _____ Reason for Moving _____

Previous Landlord _____ Phone # _____
Landlord Address _____ Dates of Occupancy _____
Rental Rate/Mortgage Payment _____ Reason for Moving _____
Have you ever been evicted? _____ Foreclosed upon? _____ If yes, explain why _____

Your Employer _____ Supervisor _____
Address _____ Dates of Employment _____
Phone # _____ Job Title _____ Full /PartTime _____ Monthly Gross Income _____

Additional Monthly Income _____ Source _____

Previous Employer _____ Job Title _____
Dates of Employment _____ Phone # _____

Emergency Contact, Name _____ Phone # _____
Complete Address _____ Relationship _____

Please list 3 relatives/references who will not be living with you:
Name Relationship Address City/State Phone #

Name	Relationship	Address	City/State	Phone #

Names of ALL other people that will be occupying the apartment: 1Bed.-2 person limit, 2 Bed.- 4 person limit.

	SS#	DOB	Relationship
1.			
2.			
3.			

I hereby authorize **Coopers Landing Apartments** to perform a credit check (on all persons 18 years of age or older), a landlord check, a criminal background check, and an employment verification. Any falsification of the information can be grounds for denial and/or terms of lease. I agree to provide a copy of my driver's license/ state identification card upon application. I agree to pay a non-refundable application fee of \$30.00. I agree to pay a reservation fee of \$100.00. If the application is denied, the reservation fee will be refunded. If the application is approved, the reservation fee will be applied to the Security Deposit of \$100.00 (unless a higher Security Deposit is required). A non-refundable cleaning fee of \$150.00 is to be paid at lease signing. If an apartment has been assigned with an agreed upon move-in date and the applicant cancels, the deposit will be forfeited. All applications are subject to Management approval.

Signature _____ Date _____
Home Phone # _____ Work/Mobile Phone # _____
How did you hear about us? _____