

# Rental Application

p: 734.741.9300 | f: 734.741.1259  
e: cmbpropmgmt@gmail.com | AnnArborApartments.net  
1700 Geddes Avenue, Apt. A7, Ann Arbor, MI, 48104



## Rental Unit Information

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Property \_\_\_\_\_ Unit Size \_\_\_\_\_ Lease Starting \_\_\_\_\_

## Applicant Information

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Full Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_ Social Security Number \_\_\_\_\_

State ID | State \_\_\_\_\_ OR Passport ID | Country \_\_\_\_\_

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

Current Landlord Name \_\_\_\_\_ Landlord Phone Number \_\_\_\_\_

Current Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Employer's Phone Number \_\_\_\_\_ Start Date \_\_\_\_\_ Monthly Income \_\_\_\_\_

## Prior Applicant Addresses

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Address \_\_\_\_\_ Dates Occupied \_\_\_\_\_

Landlord Name \_\_\_\_\_ Landlord Phone Number \_\_\_\_\_

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Address \_\_\_\_\_ Dates Occupied \_\_\_\_\_

Landlord Name \_\_\_\_\_ Landlord Phone Number \_\_\_\_\_

## Roommate Information

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Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

I am/we are making a non-refundable deposit of \$ \_\_\_\_\_

and signing the lease on this date: \_\_\_\_\_

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

# Attached Authorization

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To whom it may concern:

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Please return this form to CMB Management's office as soon as possible, in order to complete my rental application. Thank you for your time!

I/we authorize CMB Management to verify all information on the rental application, by all available means, including consumer reporting agencies, public records, current and previous rental property owners, employers, and personal references. Reverification or investigation of preliminary findings is not required.

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

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### *Below for Office Use Only*

#### Rental Verification

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Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

Did applicant sign a lease?    yes | no      Lease Dates: \_\_\_\_\_ to \_\_\_\_\_  
Were there other lease holders?    yes | no      Monthly Rent: \_\_\_\_\_

Number of late fees \_\_\_\_\_      Number of NSF fees \_\_\_\_\_

Was proper notice given to vacate?    yes | no

Was there any damage to the unit?    yes | no

Would you rent to this applicant again?    yes | no

Were there complaints regarding the  
applicant, from other residents?    yes | no

Please list any comments to further respond to the above questions:

\_\_\_\_\_  
\_\_\_\_\_

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

Thank you again for your cooperation!

Sincerely,  
CMB Management