



Please fill out this application in its entirety.  
Failure to do so will result in your application being denied.

Please send your application to [arborvillage@dhdventures.com](mailto:arborvillage@dhdventures.com). The \$30 application fee can be paid over the phone at 517-531-4287.

Desired Rental Address: \_\_\_\_\_

### Personal Information

Name: \_\_\_\_\_ Phone (Primary): \_\_\_\_\_  
Date: \_\_\_\_\_ Phone (Alternate): \_\_\_\_\_  
Email Address: \_\_\_\_\_

### Emergency Contact Information

Emergency Contact Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Phone (Primary): \_\_\_\_\_ Phone (Alternate): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

### Landlord Information

Landlord Name: \_\_\_\_\_ Phone (Primary): \_\_\_\_\_  
Phone (Alternate): \_\_\_\_\_ Monthly Rent: \_\_\_\_\_  
Does Your Landlord Know You're Moving? \_\_\_\_\_ Lease Expiration: \_\_\_\_\_  
Time at current residence: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Previous Landlord: \_\_\_\_\_ Phone (Primary): \_\_\_\_\_  
Time at Residence: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Address: \_\_\_\_\_

### Employer Information

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Time Employed: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Rate: \$ \_\_\_\_\_ Hours worked per week: \_\_\_\_\_

### Co-Tenant Information

Co-Tenants/Family Members: Number of Adults: \_\_\_\_\_ Children: \_\_\_\_\_  
Names: 1) \_\_\_\_\_ 2) \_\_\_\_\_  
3) \_\_\_\_\_ 4) \_\_\_\_\_

### Criminal History

Have You Been Convicted of a Crime? \_\_\_\_\_ If Yes, Please Explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Vehicle Information

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_  
Color: \_\_\_\_\_

## Bank Information

Bank: \_\_\_\_\_ Type(s) of Account(s) Held: \_\_\_\_\_  
How Long Have You Banked Here? \_\_\_\_\_

## Pet Information

Do You Have a Pet(s)? \_\_\_\_\_ Number of Pets: \_\_\_\_\_  
Types of Pets: \_\_\_\_\_  
Breeds (Dogs): \_\_\_\_\_  
Breeds (Cats): \_\_\_\_\_  
Breeds (Other): \_\_\_\_\_  
Is/Are Your Pet(s) Neutered: \_\_\_\_\_ Declawed: \_\_\_\_\_

Certain Dog Breeds (Including but not limited to Akitas, Dobermans, Chow Chows, Pit Bulls, Staffordshire Terriers, Rottweilers, German Shepherds, Cane Corso Mastiffs, Dalmatians, and St. Bernards) are not covered by our insurance and so are not allowed on our properties.

## Please Read and Sign Below:

I authorize you to contact landlord, credit, employment and personal references that I have given on this application, as well as obtain my consumer credit report. The information I have given on this application is, to the best of my knowledge, true and correct. I understand that if it is discovered that information I provided was false, my deposit will be forfeit. I understand that all deposits paid are non-refundable if I choose to not occupy an apartment owned by this agency. If my application is not approved by this agency, I will receive a refund a refund of my deposit(s). If my application is approved and I choose not to occupy the apartment, I understand I am forfeiting my deposit(s) in full.

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_