

Return completed applications to:

In person: Airview Center
Lockhart Management & Consulting, LLC
2725 Airview Blvd., Suite 202
Kalamazoo, MI 49002

By mail: Lodge House
c/o Lockhart Management & Consulting, LLC
2725 Airview Blvd., Suite 202
Kalamazoo, MI 49002

By fax: 269-350-2039

IMPORTANT: Please return this application with the following; alternate documents may be accepted, please ask:

1. Proof of citizenship, such as a birth certificate or passport
2. Government issued photo ID that is current (not expired)
3. Proof of Social Security number, such as a Social Security card

If you have questions please call 269-350-2015 and leave a message. Your call will be returned.

Thank you for your interest in Lodge House!





LODGE HOUSE
RENTAL APPLICATION



If you need interpreter services to complete this application, please contact the office at 269-350-2015 or TTY Relay 711

Head of Household
Street Address
City/State
Zip
Social Security #
Birthdate
Sex: M F Prefer not to Respond
Phone #
Co-Head/Spouse
Street Address
City/State
Zip
Social Security #
Birthdate
Sex: M F Prefer not to Respond
Phone #
Names of other occupants
Birthdate
Social Security #
Relationship to Head

What size apartment are you applying for? Studio
Are you experiencing homelessness? Yes No
Does your household require any accessibility features? Yes No Describe
Does your household have any reasonable accommodations requests? Yes No Describe

List all states that any household member has lived in:
Have you or any member of your household served in the military?
Have you been displaced due to a presidentially declared disaster?
Are you or any member of your household subject to a State Lifetime Sex Offender Registry? Yes No

Employment:

Circle one: Employed Full-Time Employed Part-Time Self-Employed Not Employed
Current Employer: Position: How Long:
Address: Supervisor: Phone:
City: State: Zip: Fax:
Current Wage: \$ per: hour week bi-weekly bi-monthly monthly yearly

Other Income:

Note: Although this information is voluntary under the Federal Fair Housing Act, failure to provide such income information may result in non-qualification for residency for any rental unit in this program.

Other income includes, but is not limited to: alimony, child support, FIP Grant, unemployment, aid to dependent children, social security, annuities, insurance policies, retirement benefits, pensions, disability, gifts from family and other regular periodic payments. Please consult the leasing personnel for complete list of other income.

1) Type of income Annual amount Contact address or phone
2) Type of income Annual amount Contact address or phone

Bank Information:

1) Checking Balance Savings Balance
Your bank
Address City/State Zip Code
2) Checking Balance Savings Balance
Your bank
Address City/State Zip Code

Assets:

Assets include: Cash (wherever held, trusts, equity in real estate or capital investments, notes receivable, stocks, bonds, money market account, certificate of deposit, IRA's, retirement and pension funds, whole life insurance policies and luxury personal property (gems, jewelry, art, coin collections, etc.)). You must also include the value of any assets disposed of in the past 24 months at less than fair market value.

Assets do not include: Necessary personal property such as clothing, furniture, cars, wedding ring, other jewelry that is not held as an investment, etc. Also excluded is any special equipment for use by persons with disabilities, interests in Indian trust land, term life insurance policies where there is no cash value, and assets of an active business.

Are the assets (as defined above) of the whole household more than \$5,000? Yes No

Have you disposed of any assets at less than fair market value within 24 months? Yes No

If YES, to either, please complete the asset addendum.

If NO, what are the anticipated earnings on all household assets for the next year? \$

