



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? \$

Please provide a 5-year Landlord history (list everywhere you have lived in the last 5 years, add pages if needed):

Present Landlord Month & Year Moved In _____ Reason for Leaving _____ Name of Landlord _____ Phone # _____ Rent \$ _____ Address _____ Are you receiving housing assistance/subsidy now? <input type="checkbox"/> Yes <input type="checkbox"/> No
Previous Landlord Month & Year Moved In _____ Reason for Leaving _____ Name of Landlord _____ Phone # _____ Rent \$ _____ Address _____
Previous Landlord Month & Year Moved In _____ Reason for Leaving _____ Name of Landlord _____ Phone # _____ Rent \$ _____ Address _____

Has your family's assistance or tenancy in a subsidized program ever been terminated for:		
Fraud?	Yes	No
Non-payment of rent?	Yes	No
Failure to cooperate with recertification procedures?	Yes	No
Have you or are you in the process of being charged and/or convicted of any drug related offense?	Yes	No
Are you able to meet the requirements of tenancy?	Yes	No
Are you a current illegal abuser or addict of a controlled substance?	Yes	No

How did you hear about our community?
 Newspaper Integrated Services of Kalamazoo Internet Drive By Referred By _____
 Other _____

I hereby authorize 1211 S. Westnedge, LLC d/b/a Lodge House to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information. I understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection with respect or in connection with the rental or lease of a residence for which application was made. **I hereby expressly release 1211 S. Westnedge, LLC d/b/a Lodge House, and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies. BY SIGNING THIS APPLICATION, I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS ACCURATE AND COMPLETE.**

Signature – Head of Household _____ Date

Signature – Co-head of Household or other family member 18 years or older _____ Date

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**

Lodge House does not discriminate in the provision of housing and housing related transactions based on race, color, religion, sex, national origin, disability, familial status, age, marital status, height, and weight, and extends housing protections to gay, lesbian, bisexual and transgender individuals.

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 USC 408 (a) (6), (7) and (8).