

# APPLICATION FOR LEASE

## The Residences of Merrillville Lakes

**Bordered Area to be Completed by Management**

Verification of age 55 or older required:

(Check one) \_\_\_\_\_ Driver License or \_\_\_\_\_ Birth Certificate  
D.O.B. \_\_\_\_\_

Lease Term \_\_\_\_\_ to \_\_\_\_\_

Direct Debit (Check One) \_\_\_\_\_ Yes \_\_\_\_\_ No

|                                       |          |
|---------------------------------------|----------|
| Apartment #                           | _____    |
| Rent Amount                           | \$ _____ |
| Cable/Fitness Center/Garbage/Internet | \$ 70.00 |
| Pet Fee                               | \$ _____ |
| Garage Rent                           | \$ _____ |
| Security Dep.                         | \$ _____ |
| Pet Deposit                           | \$ _____ |
| Garage Dep.                           | \$ _____ |

Name (Occ. 1) \_\_\_\_\_ Age \_\_\_\_\_ D.O.B. \_\_\_\_\_

Name (Occ. 2) \_\_\_\_\_ Age \_\_\_\_\_ D.O.B. \_\_\_\_\_

Present Address (Occ. 1) \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone (Occ. 1) (\_\_\_\_) \_\_\_\_\_ How long at this address \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Present Address (Occ. 2) \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone (Occ. 2) (\_\_\_\_) \_\_\_\_\_ How long at this address \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Present Employment (Occ. 1) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Employer Address (Occ. 1) \_\_\_\_\_

Length of Employment (Occ. 1) \_\_\_\_\_ Position \_\_\_\_\_ Mo. Gross Income \_\_\_\_\_

Previous Employment (if above less than 2 years) (Occ. 1) \_\_\_\_\_ How long \_\_\_\_\_

Present Employment (Occ. 2) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Employer Address (Occ. 2) \_\_\_\_\_

Length of Employment (Occ. 2) \_\_\_\_\_ Position \_\_\_\_\_ Mo. Gross Income \_\_\_\_\_

Previous Employment (if above less than 2 years) (Occ. 2) \_\_\_\_\_ How long \_\_\_\_\_

Present Landlord (Occ. 1) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Present Landlord (Occ. 2) \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Name, relationship and age of all others who will occupy apartment:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Nearest Relative \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Relationship to Lessee \_\_\_\_\_

Auto Make \_\_\_\_\_ Auto Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_

Auto License # \_\_\_\_\_ State \_\_\_\_\_ Driver License # \_\_\_\_\_

Bank Name \_\_\_\_\_ Account # \_\_\_\_\_

Type of Apartment desired \_\_\_\_\_ Date desired \_\_\_\_\_

Type and number of Pet(s) \_\_\_\_\_ Weight \_\_\_\_\_

Applicant acknowledges that the selection of an apartment will cause the owner to remove that apartment from the market, so that if applicant fails to occupy the apartment, Owner will incur damages which are certain to occur, but difficult to calculate. Therefore, Applicant shall deposit with the Owner, within five (5) days of selection of an apartment, an amount of money equal to the amount of security deposit required under the Lease. If Applicant occupies the apartment, the entire amount of this deposit shall be converted to the security deposit required under the Lease; however, if Applicant fails to occupy the apartment, this deposit shall be considered liquidated damages and shall be retained by the Owner.

I understand that if I have a pet, I will abide by all Rules & Regulations regarding pets. I further understand that my pet cannot weigh more than 25 pounds. I understand that if I rent a garage space, I will abide by the Parking Rules & Regulations.

The application fee is due at the time this Application is completed. The application fee is non-refundable. If applicant is not accepted, the deposit will be refunded.

This will certify that only those mentioned in this application will occupy the premises, and will also certify that I have never been evicted from a residence.

Lessor/Agent \_\_\_\_\_

Applicant Signature (Occ. 1) \_\_\_\_\_

Applicant Signature (Occ. 2) \_\_\_\_\_

Date of Application \_\_\_\_\_