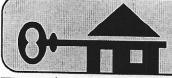


RENTAL APPLICATION Every occupant over the age of 18 MUST fill out a separate application (even if married). Please fill out this form COMPLETELY and sign where indicated.

MIDDLE	DATE OF BIRTH / / When would you like to move in? PHONE	CUPATION CUPATION CUPATION	DRIVERS LICENSE # EMAIL LANDLORD PHONE Is your present rent up to date? LANDLORD PHONE Was your rent up to date? LANDLORD PHONE Was your rent up to date? AGE AGE AGE		
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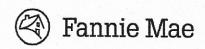


RENTAL APPLICATION

Every occupant over the age of 18 MUST fill out a separate application (even if married). Please fill out this form COMPLETELY and sign where indicated.

CREDIT CARD / FINANC	CIAL IN	NFORMATION						
CAR LOAN LIEN HOLDER		BALANCE	MONTHLY		CREDITOR'	S		
CREDIT CARD COMPANY	•	BALANCE OWED	PAYMENT MONTHLY		PHONE #	<u>-</u>		
CREDIT CARD COMPANY		BALANCE OWED	PAYMENT MONTHLY		PHONE #	S		
CREDIT CARD COMPANY	BALANCE	PAYMENT MONTHLY		PHONE # CREDITOR'S				
CHILD SUPPORT/ OTHER CREDIT OWED		OWED BALANCE	PAYMENT		PHONE #	4.0	-	
BANK ACCOUNT NAME OF BANK		OWED BALANCE	PAYMENT MONTHLY		PHONE #			
			PAYMENT		NUMBER			لــــــا
EMERGENCY / PERSON.	AL REF		IION					
		PHONE	CELL HOME	PHONE	-	_	HOME	□ work
RELATION		ADDRESS		CITY/STATE/ZII	•			
EMERGENCY CONTACT		PHONE	CELL HOME	PHONE	_	_	HOME	[] WORK
RELATION		ADDRESS		CITY/STATE/ZII	•		<u></u>	- WORK
PERSONAL REFERENCE		PHONE	CEU. HOME	PHONE		_	HOME	Пиори
RELATION		ADDRESS		CITY/STATE/ZIF	•		I HOWE	CI WORK
PERSONAL REFERENCE		PHONE	CELL HOME	PHONE			Chuous	Cluser
RELATION		ADDRESS	A cere A HOWE	CITY/STATE/ZIF	•		HOME	WORK
APPLICANT QUESTION	NAIRE	/ AUTHORIZATION						
Has applicant ever been sued for bills?	S 🔲 NO	Has applicant ever been locked out of	their apartment by the	he sheriff?	YES	□ NO		
Has applicant ever been bankrupt?	S 🔲 NO	Has applicant ever been brought to co	ourt by another landlo	ord?	YES	□ NO		
Has applicant ever been guilty of a felony?	s 🔲 NO	Has applicant ever moved owing rent	or damaged an apart	ment?	YES	□ NO		
Has applicant ever broken a Lease?	s 🔲 NO	Is the total move-in amount available	now (rent and depos	it)?	YES	□ NO		
Applicant authorizes the landlord to contact past a	nd present lar	adlords, employers, creditors, credit bures	us neighbors and an	v other sources	doomad		investigate a	
Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant. All information is true, accurate and complete to the best of applicant's knowledge. Landlord reserves the right to disqualify tenant if information is not as represented.								
ANY PERSON OR FIRM IS AUTHORIZED TO RELEA	SE INFORMAT	TION ABOUT THE UNDERSIGNED UPON	PRESENTATION OF TH	IIS FORM OR A	РНОТОС	OPY OF THIS	FORM AT AN	YY TIME.
x								
APPLICANT SIGNATURE			DATE			•		
If you have any quest	ions about the	e interpretation or legality of this form, p	lease consult an atto	rney or other q	ualified pe	erson.		
NOTES:					·			
							,	

REQUEST FOR VERIFICATION OF RENT OR MORTGAGE We have received an application for a loan from the applicant listed below, to whom we understand you rent or have extended a loan. INSTRUCTIONS: LENDER- Complete items 1 thru 8. Have applicant(s) complete item 9. Forward directly to lender named in item 1. LANDLORD/CREDITOR- Please complete Part II as applicable. Sign and return directly to the lender named in item 2 PART I - REQUEST 1.TO (Name and address of Landlord/Creditor) 2. FROM (Name and address of lender) Bon Realty Property Management 226 S Lincoln Ave Niles, MI 49120 269-684-4445 3.SIGNATURE OF LENDER 4. TITLE 5.DATE **6.LENDERS NUMBER** 7. INFORMATION TO BE VERIFIED PROPERTY ADDRESS ACCOUNT IN THE NAME OF: ACCOUNT NO. MORTGAGE LAND CONTRACT RENTAL OTHER 8.NAME AND ADDRESS OF APPLICANT(S) 9. SIGNATURE OF APPLICANT(S) PART II - TO BE COMPLETED BY LANDLORD/CREDITOR RENTAL ACCOUNT MORTGAGE ACCOUNT LAND CONTRACT Tenant has rented since ____ Date mortgage originated ___ Interest rate Original mortgage amount \$ _____ FIXED____ARM___ Amount of rent \$ _____ per ____ Current mortgage balance \$ _____ FHA_____VA____ Is rent in arrears? Yes _____No ____ ____CONV____ Monthly Payment P & I only \$ _____ FNMA Number of times 30 days past due* Payment with taxes and ins. \$ _____ Next pay date ___ Is account satisfactory ? Yes _____No___ Is mortgage current ? Yes____No__ No of late payments* Is mortgage assumable ? Yes____ No ___ Insurance agent: Satisfactory account? Yes No * Number of times account has been 30 days overdue in the last 12 months ADDITIONAL INFORMATION WHICH MAY BE OF ASSISTANCE IN DETERMINING APPLICANT(S) CREDIT WORTHINESS SIGNATURE OF CREDITOR TITLE DATE The confidentiality of the information you have furnished will be preserved except where disclosure of this information is requires by applicable law. The form is to be transmitted directly to the lender and is not to be transmitted through the applicant or any other party. GFI- form VOM rev. 6-5-2002



Request for Verification of Employment

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

E T	mployer — Please cor he form is to be tran	mplete either Part semitted directly	Il or Part III as applicate to the lender and is	ole. Complete Part IV and not to be transmitted the	eturn directly to rough the appli	lender na cant or a	med in item iny other p	2. arty.	
Part I - Rec	uest								
To (Name and address of employer)				2. From (Name and address of lender) Bon Realty Property Management 226 S Lincoln Ave Niles, MI 49120 269-684-4445					
i certify that this	verification has be	en sent directly	to the employer and					any other interested party.	
3. Signature of		on contrained by	4. Title	a mas mot passed timody		. Date	pilicant or	6. Lender's Number	
								(Optional)	
I have applied for	r a mortgage loan	and stated that	I am now or was fo	ormerly employed by you	u. My signatui	e below	authorizes	verification of this information.	
7. Name and Ac	dress of Applicant	(include employ	ee or badge numbe	rl	8. Signa	ture of	Applicant		
Part II - Ve	rification of Pr	esent Emplo	yment						
9. Applicant's D	ate of Employment	10. Pres	sent Position			11. Pr	obability o	of Continued Employment	
12A. Current (Gross Base Pay (En	ter Amount an	d Check Period)	13. For Military P	ersonnel Only		14 If O	vertime or Bonus is Applicable.	
	☐ Annual	☐ Hourly		Pay Grade				s Continuance Likely?	
	☐ Monthly	Other (S	ipecify)	Туре	Monthly An	nount	1	ertime 🖸 Yes 🗆 No	
\$	Weekly 12B. Gr	oss Earnings		Base Pay	\$			aid hourly average hours per	
Туре	Year To Date	Past Year	Past Year	Rations	\$		Wee	ık .	
Base Pay	Thru	\$	\$	Flight or Hazard	\$		16. Date	e of applicant's next pay increase	
				Clothing	\$]		
Overtime	\$	\$	\$	Quarters	\$		17. Proj	ected amount of next pay increase	
Commissions	\$	\$	\$	Pro Pay	\$		18. Dat	e of applicant's last pay increase	
Bonus	\$	\$	\$	Overseas or Combat	\$		19. Am	ount of last pay increase	
Total	s 0.00	s 0.00	\$ 0.00	Variable Housing Allowance	\$				
	-	1		ndicate time period and	reason)				
Part III - Vo	erification of P			ation Per (Year) (Month)	(Week)		-		
22. Date Termina	ted	Ba	ıse	Overtime	Commiss	ions		Bonus	
24. Reason for L				25. Position	Held				
or conspiracy p	uthorized Sign ourposed to influer Assistant Secretar	nce the issuance	al statutes provide ce of any guaranty	severe penalties for ar or insurance by the V	ny fraud, inte A Secretary,	ntional r the U.S	nisreprese .D.A., Fm	ntation, or criminal connivance HA/FHA Commissioner, or	
26. Signature of	Employer		27	. Title (Please print or typ	e) .			28. Date	
29. Print or type	name signed in Item	26	30	. Phone No.					