



Manistee Rental Management, LLC

428 1st Street, Manistee, MI 49660

Office 231-299-1180 manisteerealestate@gmail.com

Dear Applicant,

Thank you for your interest in renting from Manistee Rental Management! Here is what to expect next and an explanation of our process.

Our Process:

1. Application/Tenant Screening. Fee: \$35.00 for each adult 18+

Cosigner fee: \$35.00 (only applies when you need a cosigner)

Manual Entry of Paper Applications is an additional \$15 per application.

ONLINE APPLICATIONS ARE PREFERRED. www.ManisteeRent.com

2. Tour of Property

As soon as one of our team members reviews your application, within 2-3 business days during regular business hours, our office will reach out to you with a response. The tenant screening process generally takes 10-15 business days from the day you provide us with your complete application, successful application fee payment, *and* signed Authorization for Release of Information form. However, we make no guarantee as to the time it will take to process the tenant screening portion. The time required varies based on the responsiveness of landlords, employers, references, and other business demands.

Information Needed For Tenant Screening

- 1. Social Security Number** is needed for the background check.
- 2. Proof of Income**
 - Current check stubs showing 4 weeks of pay
 - Benefit verification letter for Social Security Income
 - Pension or retirement benefits letter
 - Employment Offer Letter from your future employer
 - Child Support or Alimony
- 3. Driver License, or State ID, or Passport.**
- 4. Current and/or Future Employment.**
- 5. Landlord and Personal References.**
- 6. Pet Information**

If you have any questions, please contact our office 231-299-1180 or manisteerealestate@gmail.com

Sincerely,

Manistee Rental Management



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Tenant Screening Criteria

Our screening process gathers information based on the following criteria:

- credit history, eviction history, and criminal history
- delinquent utility bills, accounts in collections, foreclosures, bankruptcy, judgments
- personal and landlord references
- employment verification
- income: your rent-to-income ratio should not be more than 30% of your monthly income. In other words, your monthly income should be 3 times the amount of your rent. We may ask you about other monthly expenses to determine your ability to pay rent.

Professionalism and Personal Data

Our Property Managers are licensed real estate agents in the state of Michigan. We provide equal-opportunity housing and abide by the respective state and federal laws. As part of our tenant screening process, Manistee Rental Management requires applicants to provide their Social Security Number (SSN). The SSN is necessary for conducting background checks, which include credit history, eviction history, and criminal history. This information helps us ensure the safety and security of our properties and their residents. Thank you for your understanding!

Please be assured that we are committed to the highest standards of security and confidentiality. We are a certified entity by TrendSource, a leader in compliance management. Our certification reflects our adherence to rigorous data protection protocols and our commitment to safeguarding personal information. All personal data provided is processed and stored securely, and access is strictly controlled. For the tenant background check we use On-Site.

If you have any additional information that you think may help us to assist you, please include that in your application. For questions, please contact our office.

Phone: 231-299-1180

Email: ManisteeRealEstate@gmail.com

Sincerely,

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RENTAL APPLICATION

APPLICANT INFORMATION

Applicant Name _____ Date _____

Date of Birth _____ (to verify applicants are 18 years or older).

Social Security Number (for background check) _____

Current Address _____
Street Apt # | City | State | Zip Code

Mailing Address _____
Street Apt# | City | State | Zip Code

Email Address _____

Home Phone _____ Cell Phone _____

Emergency Contact Name _____ Relation _____

Emergency Contact Phone _____

APPLICANT QUESTIONNAIRE

1. Have you ever broken a rental agreement? Please explain. _____

2. Have you ever been evicted? If so, what was the reason? _____

3. Have you ever been late paying your rent? If so, how many times were you late in 12 months? What was your reason for paying late? _____

4. When you moved out from previous rentals, did you receive your full security deposit? Please explain. _____

5. Have you ever filed for, or are in the process of filing for bankruptcy?

6. Have you been convicted of a misdemeanor or felony? If yes, please list Type of Offense, County, and State. _____



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RENTAL HISTORY & LANDLORD REFERENCES

Please provide your **current** and at least 2 **past** rental history, and landlord references. Applicants who have rented in the past, please provide your current and previous landlord's information. **For first-time renters, please note that in comments.** For homeowners who are now looking to rent, list the home address and include your monthly mortgage payment (instead of rent). When a field requires information, but you don't know the answer, or it does not apply, please write "n/a" or "unknown."

CURRENT rental information.

Rental Address _____

Dates lived at rental address (month and year) _____ through _____

Monthly Rent _____ Which Utilities did you pay? _____

Reason for Leaving _____

Landlord's Name _____ Phone _____

Landlord's Email _____

RENTAL HISTORY 2

PAST rental information

Rental Address _____

Dates lived at rental address (month and year) _____ through _____

Monthly Rent _____ Which Utilities did you pay? _____

Reason for Leaving _____

Landlord's Name _____ Phone _____

Landlord's Email _____

RENTAL HISTORY 3

PAST rental information

Rental Address _____

Dates lived at rental address (month and year) _____ through _____

Monthly Rent _____ Which Utilities did you pay? _____

Reason for Leaving _____

Landlord's Name _____ Phone _____

Landlord's Email _____



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EMPLOYMENT

Please include future, current, and previous employer information. If you are retired, please let us know. If you are unemployed, on leave, or between jobs, please provide your previous employer(s) and future employer. When a field requires information, but you don't know the answer, or it does not apply, please write "n/a" or "unknown."

EMPLOYMENT 1

Current or Future employer information. If you are unemployed or retired, please indicate that below.

Employer Name _____

Employer Address _____

Employer Phone _____ Email _____

Position held _____ Currently employed at this job? Yes or No

Employment Dates from _____ to _____ (if still employed, write "current")

Future Start Date: _____

Monthly Gross Salary _____ Hourly Rate _____

How often are you paid? (weekly, bi-weekly, other please specify) _____

Supervisor's Name _____ Supervisor's Title _____

Please list contact info for Human Resources Department for your company (when applicable).

EMPLOYMENT 2

Current or previous employer information. If you are unemployed or retired, please indicate that below.

Employer Name _____

Employer Address _____

Employer Phone _____ Email _____

Position held _____ Currently employed at this job? Yes or No

Employment Dates from _____ to _____ (if still employed here, write "current")

Monthly Gross Salary _____ Hourly Rate _____

How often are you paid? (weekly, bi-weekly, other please specify) _____

Supervisor's Name _____ Supervisor's Title _____

Please list contact info for Human Resources Department for your company (when applicable).



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EMPLOYMENT 3

Previous employer information. If you are unemployed or retired, please indicate below.

Employer Name _____

Employer Address _____

Employer Phone _____ Email _____

Position held _____ Currently employed at this job? Yes or No

Employment Dates from _____ to _____ (if still employed, write "current")

Monthly Gross Salary _____ Hourly Rate _____

How often are you paid? (weekly, bi-weekly, other please specify) _____

Supervisor's Name _____ Supervisor's Title _____

Please list contact info for Human Resources Department for your company (when applicable).

PERSONAL REFERENCES

Please provide **at least two references**, preferably not a family member or someone you live with. When a field requires information, but you don't know the answer, or it does not apply, please write "n/a" or "unknown."

1. First Reference Name _____ Relation _____

Number of years known _____ Reference Phone _____

Email _____

2. Second Reference Name _____ Relation _____

Number of years known _____ Reference Phone _____

Email _____

3. Third Reference Name _____ Relation _____

Number of years known _____ Reference Phone _____

Email _____



ADDITIONAL OCCUPANTS 18 YEARS OR OLDER

Please list any additional occupants that are *18 years of age and older* that will be living with you. If none, please write "none." **All other occupants 18 years of age and older will need to fill out a separate application.**

1st Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Occupant's Phone _____ Email _____

Comments _____

2nd Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Occupant's Phone _____ Email _____

Comments _____

3rd Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Occupant's Phone _____ Email _____

Comments _____

4th Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Occupant's Phone _____ Email _____

Comments _____



ADDITIONAL OCCUPANTS *UNDER 18 YEARS OF AGE*

Please provide information about additional occupants that are your dependents, children, or living with you and under the age of 18. If none, please write "none."

1ST Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Comments _____

2nd Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Comments _____

3rd Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Comments _____

4th Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Comments _____

5th Additional Occupant's Full Name _____

Date of Birth _____ Relation _____ Number of years known _____

Comments _____



ANIMALS & PETS

Applicant Name: _____ **Phone:** _____

Property of Interest: _____

PET INFORMATION

Number of Pets _____

	Pet 1	Pet 2
Name		
Type of Pet (i.e., dog, cat)		
Breed		
Weight		
Age		
Crate Trained? yes or no		
Litter Box Trained (cats) yes or no		
House Trained		
Declawed (cats)		
Spayed/neutered? yes or no		
License # (for dogs only, required by City of Manistee)		
Current Photo of Pet		

Additional Information:



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VEHICLES

Please provide vehicle information. When a field requires information, but you don't know the answer, or it does not apply, please write "n/a" or "unknown."

1st Vehicle Make _____ Vehicle Model _____

Vehicle Color _____ Vehicle year _____ Vehicle License Plate _____

Vehicle Owner's Name _____ Driver's License _____

Comments _____

2nd Vehicle Make _____ Vehicle Model _____

Vehicle Color _____ Vehicle year _____ Vehicle License Plate _____

Vehicle Owner's Name _____ Driver's License _____

Comments _____

HOUSING INFORMATION

So that we may better assist you, please provide information about your housing needs. Thank you!

Desired Move-in Date _____ Desired Lease Duration _____

Desired Rent \$ _____ Desired Number of bedrooms _____

Desired Number of Bathrooms _____

Comments _____



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COSIGNER

This section is for cosigners only. A cosigner is a person – such as a parent, close family member or friend – who agrees to guarantee the debt of another. It does not mean that they will be living with you. Any occupants who will live with you 18 years of age or older will need to complete a separate application.

Cosigner Name _____ Relation _____

Cosigner Date of Birth _____ Number of Years Known _____

Cosigner Social Security Number _____

Gross Monthly Income \$ _____ Hourly Rate \$ _____

Cosigner Phone _____ Alt Phone _____

Cosigner Email _____

Cosigner Home Address

_____ Street Apt# | City | State | Zip Code

Cosigner Mailing Address if different from above. If same, write “same.”

_____ Street Apt# | City | State | Zip Code

Cosigner’s Employer Name _____

Employer Address _____

Employer Phone _____ Email _____

Position held _____

Employment Dates from _____ to _____ (if still employed, write “current”)

Cosigner’s Monthly Gross Salary _____

Supervisor’s Name _____ Supervisor’s Title _____

Comments _____



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ADDITIONAL INFORMATION

Please provide additional information that you think we may need to know. For questions, contact our office directly by phone 231-299-1180 or email: ManisteeRealEstate@gmail.com

Thank you for your interest! We look forward to working with you.

Manistee Rental Management, LLC

Other comments: _____

TERMS AND CONDITIONS

Manistee Rental Management, LLC, is under contract with the property owners, acting as an authorized Landlord's Agent. As a matter of company policy, we utilize the same screening process for every applicant, adhering to equal housing opportunity laws. Before one of our agents may show a property to a prospective tenant, we must receive your application and photo ID.

By signing below, you authorize Manistee Rental Management to run a tenant screening and background check with On-Site and verification of references given for a non-refundable fee of **\$35.00** for each adult applicant, and **\$35.00** for a cosigner (when cosigner applicable). You also understand that this is NOT an agreement to rent and that all applications must be approved. By signing you declare that the statements above are true and correct, and agree that Manistee Rental Management, LLC may terminate this agreement entered into in reliance on any misstatement made above.

Applicant Signature _____ **Date** _____

Credit/Debit Card Information

Name on Card _____

16 Digit Card Number _____

Expiration Date ____/____ **CVC Code** _____

Billing Address _____ **Zip Code** _____

As a cosigner, by signing below, I authorize Manistee Rental Management to run a tenant screening and background check with TransUnion Smart Move®.

Cosigner Signature _____ **Date** _____



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****AUTHORIZATION FOR RELEASE OF INFORMATION****

Applicant Name: _____ Date of Birth: _____

Current Address: _____

City, State, Zip: _____

Phone Number: _____ Email Address: _____

I, the undersigned, hereby authorize Manistee Rental Management and its designated agents and representatives to conduct a comprehensive review of my background for tenancy purposes. By consenting to the release of my personal information, I acknowledge that Manistee Rental Management may conduct verification of my income, employment history, credit history, rental history, and obtain reports regarding my character, general reputation, and mode of living, which may include interviewing other persons, landlords, and personal references.

I understand that the information released by my current and previous landlords, employers, personal references, and other sources will be used by Manistee Rental Management to determine my eligibility for rental housing. I understand that this information may include, but is not limited to, my rental history, employment history, income, credit history, criminal history, and eviction records.

****AUTHORIZATION TO CONTACT****

I hereby authorize all persons, schools, companies, corporations, credit bureaus, law enforcement agencies, and other agencies and institutions to release information they may have about me to Manistee Rental Management or its agents. This includes information provided by landlord references, personal references, and employers as specified in my rental application or as may be discovered during the course of the background investigation.

I agree that a photocopy or electronic copy of this authorization may be accepted with the same authority as the original, and I specifically waive any written notice from any entities and individuals who may provide information based on this authorized request.

I understand this authorization, in original or copy form, authorization is valid for 30 days from the date of signing, after which it automatically expires unless expressly renewed in writing by the applicant.

Applicant Signature: _____ Date: _____

****Below For Office Use Only****

Verified by: _____ Date: _____

Notes: _____