

PRELIMINARY RENTAL APPLICATION



Fedor Manor
Apartments

12400 Madison Ave. Lakewood, OH 44107
(P) 216-226-7575 (F) 216-226-9309 (TTY) 800-750-0750

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

AGE: _____ DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

Please list full name, date of birth, and social security number of anyone else that will be living in the apartment with you:

How long have you lived at the address above? _____ Do you Own _____ Rent _____

Please list your previous address: _____

Please list all states in which you or members of the household have ever lived: _____

Total **GROSS** Monthly Household Income _____ (this includes pensions, social security, SSI, employment, Annuities, etc)

Do you have a physical mobility and believe you would benefit from an ADA apartment? _____

How did you hear about Fedor Manor Apartments? _____

*****IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS PLEASE USE THE BACK OF THIS APPLICATION TO PROVIDE DETAILED INFORMATION*****

Are you or any member of your household a full-time student? Yes _____ No _____

Have you or any member of the household ever been evicted or had a rent subsidy terminated? Yes _____ No _____

Are you or any members of the household subject to a state lifetime sex offender registration requirement? Yes _____ No _____

The undersigned declares that the facts contained in the Preliminary Application are true and complete to the best of his or her knowledge and understands that false statements on the Preliminary Application relating to residency history, income, or assets and other factors are of eligibility, and our resident selection standards may result in the rejection of this and any future application of housing. You are further advised that our resident selection process includes a criminal background search an inquiry of current or past landlords. Your signature below released all parties providing pertinent information from any liability that may result from furnishing this information.

Signature of Applicant: _____ Date: _____

Signature of Applicant: _____ Date: _____

In order to assure that we are able to contact you when a unit becomes available, please remember to notify the Fedor Manor in writing if

