Welcome to Colonial Court
Apartments & Townhomes

Credit and Reference Authorization

Leaseholder Credit

Last Name _____ First _____ Initial ____

Present Address _____ City _____ State ____
Zip ____

Social Security Number _____

Spouse: Full Name _____ Social Security Number _____

Completed by office personnel only:

Leaseholder Employment Verification

Date Received _____ Source _____ Length _____

Confirmed By _____ Wage Verification _____

Additional Comments
_____

Leaseholder Landlord Reference

Date Verified _____ Person verified with _____

Length _____ Rental Rate _____ Would rent again _____

Additional Comments _____

I/We understand that Frankel Management will review my/our personal credit, landlord reference, and employment history as well as my/our rental application.

Applicant Signature _____ Date _____

Applicant Signature _____ Date _____

Manager Signature _____ Date _____

PLEASE PRINT, SIGN & DATE AND FAX TO 248-646-1249
Thank You!

Reset

Colonial Homepage