

Sault Ste. Marie Tribe of Chippewa Indians
DeMawating Development Rental Application
Equal Opportunity Housing

42 Wood Lake
 Kincheloe, MI 49788
 (906)498-9800 Office
 (906)498-9346 Fax

Please Choose Location

- DeMawating Development (Kincheloe)** _____
- Riverside Trailer Park (Sault Ste Marie)** _____
- Seven Seas (Sault Ste Marie)** _____

Applicant

Co-Applicant

Name:	
Address:	
City:	
State:	
Zip:	
Phone #:	
License #:	
Birthdate:	
S.S.#:	
Email:	

Person(s) who will reside in the unit (please include the applicant)

Name	Relationship to Applicant	Date of Birth	Social Sec. #	Tribal Membership	Tribal Roll #

Email Address		
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Present Landlord Name: _____ Phone #: _____

How long have you lived at your current address? _____

How soon do you need to move? _____ Number of bedrooms: _____

Landlord References:

Name	Phone Number	Address	

Have you ever broken a lease or been evicted from any type of housing? _____ If yes, please explain:

Do you have any pets? _____ If yes, which type(s)? _____

Emergency Contact:

THIS SECTION IS MANDATORY TO COMPLETE APPLICATION PROCESS (Completion of this section does not relieve the applicant of the obligation to provide a forwarding address to the landlord as required).

PLEASE NOTE: This Emergency Contact shall be used for emergency purposes. Should applicant fail to provide a forwarding address to the landlord as required, the emergency contact information provided may be used to help ascertain the applicant's whereabouts and/or to attempt correspondence with the applicant.

Emergency Contact Information:

Name of Person not residing with you: _____

Address: _____

City, State, Zip: _____

Phone: _____

Relationship: _____

Personal References (not related):

Name	Phone Number	Address	Relationship

Income Information:

	Applicant	Co-Applicant
Employer		
Immediate Supervisor		
Address/Phone Number		
Years Employed		
Position		
Monthly Salary		
Other Income		
Income Source		
Total Monthly Income		

Have you or anyone in your household ever been convicted of any crime other than traffic violations?

___ Yes ___ No

If yes, please explain: _____

How did you hear about DeMawating Development? ___ Newspaper ___ Friend ___ Family ___ Work ___ Employee Newsletter ___ Other _____

I (We)
swear
that the
above

information is full, true and complete to the best of my (our) knowledge.

I (We) have no objections to inquiries being made for the purpose of verifying the statements made herein.

Signature of Applicant: _____ **Date:** _____

Signature of Co-Applicant: _____ **Date:** _____

Other items required to complete application:

- **Pictured ID or Driver's License**
 - **Proof of Income**
 - **Social Security Cards**
 - **Tribal Cards (if applicable)**

RELEASE OF INFORMATION AGREEMENT

PERSONAL INFORMATION

Applicant:

Name: _____ Maiden: _____

Date of Birth: _____ Phone Number: _____

Social Security Number: _____ Driver's License Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Co-Applicant:

Name: _____ Maiden: _____

Date of Birth: _____ Phone Number: _____

Social Security Number: _____ Driver's License Number: _____

Address: _____

City: _____ State: _____ Zip: _____

I hereby authorize confidential information to be released between the agencies listed in this agreement. Further, I hereby authorize confidential information to be released to the Emergency Contact person set forth in the application in the event of an emergency and/or if necessary to forward any and all mail to said person if applicant fails to provide landlord with a forwarding address as required.

Applicant's Signature: _____ **Date:** _____

Co-Applicant's Signature: _____ **Date:** _____

Agencies Releasing Information to Each Other

DeMawating Development

Sault Tribe Real Estate

Sault Ste. Marie Tribe of Chippewa Indians

42 Woodlake Drive

Kincheloe, MI 49788

Health and Welfare Agencies

Utility Companies

Law Enforcement Agencies

Credit Providers

Current and Previous Employers

Previous Landlords

Banks

Schools and Colleges

Support and Alimony Providers

Child Care Providers

Retirement System

Courts and Post Office

Social Security Administration

Credit Bureaus

Privacy Act Notice, Authority: The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937 (42 U.S.C. § 1437 et. seq., as amended), Title VI of the Civil Rights Act of 1967 (42 U.S.C. § 2000d, as amended) and by the Fair Housing Act (42 U.S.C. § 3601.19, as amended). The Housing and Community Development Act of 1987 (42 U.S.C. § 3543, as amended) requires applicants and participants to submit the Social Security Number of each household member who is six years old or older. Purpose: Your income and other information are being collected by HUD to determine your eligibility, the appropriate bedroom size, and the amount your family will pay towards rent and utilities. Other uses HUD uses your family income and other information to assist in managing and monitoring HUD-assisted programs. To protect the government's financial interest, and to verify accuracy of the information you provide, this information may be released to appropriate Federal, State and local agencies, when relevant, and to civil, criminal or regulatory investigator and prosecutors. However, the information will not be otherwise discussed or released outside of HUD, except as permitted and required by law. Penalty: You may provide all of the information requested by the HA, including all Social Security Numbers you and all other household members age six years and older, have and use. Giving the Social Security Numbers of all household members six years of age and older is mandatory, and not providing the Social Security Numbers will affect your eligibility. Failure to provide any of the requested information may result in a delay or rejection of your eligibility approval.