MIAMIOHRENTALS
TENANT INFORMATION SHEET / APPLICATION for 331 E. Chestnut
Parent Guarantee Forms must also be completed and returned as part of the application process / prior to finalizing a lease

PLEASE PRINT LEGIBLY   Date Completed: _____   Desired Date of Lease: _____

PROPERTY ADDRESS: ـــــــ 331 E. Chestnut (Chestnut Group, LLC)   ـــــــ 926 Cedar Drive (Flaig One, LLC)

NAME:_____DATE OF BIRTH: _____/_____/_____

HOME / CURRENT ADDRESS: _____

CURRENT CAMPUS ADDRESS: _____

DRIVER'S LIC#: _____ Make / Model / Color of Vehicle: _____

CELL PH#: _____   PERSONAL E-MAIL: _____

muohio.edu E-MAIL:_____@muohio.edu

Monthly Rents are collected on the 1st of each month.
All ***Semester Rents are due and collected before the semester starts. (April / Aug / Dec) NO EXCEPTIONS***
Chestnut Group, LLC does not accept financial aid documents or provide extensions for Financial Aid. If you receive Financial Aid of any sort, you must make arrangements to receive your aid by the dates indicated on your Lease Agreement. Failure to make payments on these dates will result in delays with your ability to take occupancy of the property and late fees will be collected. Deposit due at signing.

IN CASE OF EMERGENCY, ILLNESS OR ACCIDENT PLEASE NOTIFY,
Do not list individuals living in the same residence (i.e. girlfriend, boyfriend, housemate, etc)

Primary contact: NAME: _____RELATIONSHIP: _____

ADDRESS: _____
| STREET | CITY | STATE | ZIP |

 HOME PH#: _____WRK PH#:_____CELL # _____

E·MAIL: _____

Alternate contact: NAME: _____RELATIONSHIP: _____

ADDRESS: _____
| STREET | CITY | STATE | ZIP |

HOME PH#: _____WRKPH#:_____CELL # _____

E·MAIL: _____

PARENTS/LEGAL GUARDIANS INFORMATION: *This information must be provided. If it is the same as above, please state that below.*

NAME: _____RELATIONSHIP: _____

ADDRESS: _____
| STREET | CITY | STATE | ZIP |

 HOME PH#: _____WRK PH#:_____CELL # _____

E·MAIL: _____

NAMES OF ROOMMATES: _____

_____   _____

The undersigned does hereby state and swear that all information contained herein is true and accurate. Providing false, incomplete or misleading information in this form shall be cause for immediate termination of any subsequent lease agreement and/or occupancy at the option of the Lessor. Lessor is granted permission to gather information regarding applicant and to verify the validity of all information contained in the application, including the conduction of credit reports, before, during and after occupancy.   Employers, landlords, references and others are hereby granted full permission to release any information requested by Lessor. Applicant's withdrawal of this form after submission may result in the retention of the posted security deposits as liquidated damages. Submit this form via e-mail to: Tom Brinkmann at miamiohrentals@gmail.com

SIGNATURE:_____ DATE:_____

Landlord Initials: _____