## **Rental Application**

Applicant Information				
Name:				
Date of birth:		SSN:	Phone:	
Current address:				
City:		State:	ZIP Code	
Own Rent (Please circle)	Email:			
Previous address:				
City: State: ZIP Cod			ZIP Code	
			·	
Employment Information				
Current employer:				
Employer address:				How long?
Phone: E-mail:			Fax:	·
City:	State:		ZIP Code	:
Position:	Hourly	Salary (Please circle)	Annual income	
Kehillat Israel				
2014 Forest Road Lansing MI 48910				
Hours 8am – 4pm				
Office contact: Katherine Booker	Operation	is and Communications		
Kikatherineb@gmail.com		· · · · ·		
Co- Applicant				
Name:				
Date of birth:		SSN:	Phone:	
Current address:				
City:		State:	ZIP Code	:
Email:				
Item to Rent				
Item Name				
Description				How long?
Date Needed	ate Needed Pickup date		Return da	te
Rental Fee \$90 (nonrefundable)	Deposit -	\$250.00 refundable if no damage to item		
Property of Kehillat Israel				
Name:		Date:		Phone:
I authorize the verification of the information provided on this form				
Signature of applicant:				Date:
Signature of KI representitive:				Date: