LET'S GET STARTED

NOTE: Personal I.D will be required

Date _____ Name of Leasing Consultant: _____

UNIT INFORMATION (To be completed by Traditional Trades)

Address _____ Unit No. _____

Monthly Rental Amount _____ Security Deposit _____

Type of Tenanct (i.e. 12 month lease, month to month, etc.) _____

Utilities Included _____

PERSONAL INFORMATION - *Applicant #1*

Applicant's Full Name _____ Date of Birth _____
FIRST MIDDLE NAME LAST

List any prior names that you have used: _____ Soc. Sec. No. _____

Address _____ Home Phone _____

City, State, Zip _____ Cell Phone _____

D.L. No. _____ E-mail _____

PERSONAL INFORMATION - *Applicant #2*

Applicant's Full Name _____ Date of Birth _____
FIRST MIDDLE NAME LAST

List any prior names that you have used: _____ Soc. Sec. No. _____

Address _____ Home Phone _____

City, State, Zip _____ Cell Phone _____

D.L. No. _____ E-mail _____

RENTAL HISTORY

Do you own your own home? ◯ Yes ◯ No if yes, for How Long? _____

Current Address _____ How Long? _____
City State Zip

Current Landlord _____ Phone _____

Reason for Moving? _____ Current Rent Amount_____

Previous Address _____ How Long? _____
City State Zip

Previous Landlord _____ Phone _____

Reason for Moving? _____ Current Rent Amount_____

EMPLOYMENT HISTORY

Are you Retired? ◯ Yes ◯ No

Current Employer _____ Starting Date _____

Address _____
City State Zip

Job Title _____ Gross Monthly Income _____
(Before deductions)

Supervisor _____ Phone _____

Other Employer _____ Starting Date _____

Address _____
City State Zip

Job Title _____ Gross Monthly Income _____
(Before deductions)

Supervisor _____ Phone _____

OTHER SOURCES OF INCOME

List any additional income to be considered – verification required _____

_____

_____

OTHER INFORMATION

Automobiles and Other Vehicles

Make and Type _____ Year _____ Color _____ Lic. No. _____

Make and Type _____ Year _____ Color _____ Lic. No. _____

Make and Type _____ Year _____ Color _____ Lic. No. _____

Do you have pets? _____ If yes, what type and how many? _____

Do you smoke? _____

Have you ever been evicted? If yes, please provide circumstances: _____

_____

Emergency Contact

Name _____ Phone _____ Relationship _____

Address _____

City State Zip

NOTICE: You may obtain information about sex offender registry and persons registered with the registry by contacting the Wisconsin Department of Corrections on the Internet at http://offender.doc.state.wi.us/public/ or by phone at 877-234-0085

The rental of this property is limited to the use and occupancy by the individuals listed above without any right to sublet any or all of the property. Tenant may request in writing within seven days after delivery of the rental unit a list of physical damages or defects, if any, charged to the previous tenants security deposit.

I understand my consumer credit report will be obtained.

I understand that if I have misrepresented any information on this application that my application will be denied.

I authorize Landlord to do the following: (1) contact any individuals and/or businesses listed above and verify all of the information provided in this application before, during, and/or after my tenancy, and (2) obtain a copy of my consumer credit report.

I acknowledge being furnished copies of the Rental Agreement, Rules & Regulations, and if applicable, any Nonstandard Rental Provisions.

I agree to sign the Rental Agreement, Rules & Regulations and Nonstandard Rental Provisions, if applicable, prior to taking occupancy of the unit.

I certify that all of the information provided in this application is true and accurate to the best of my knowledge.

_____ _____

Signature of Applicant #1 Signature of Applicant #2

_____ _____

Date Date

NOTE: A security deposit is required from every tenant – the security deposit holds your unit for up to 60 days and is nonrefundable.
Then transfers as a deposit against damages or loss to the premises during the lease - the security deposit cannot be used for the last month's rent.

How did you hear about us?

☐ Current Resident (Name) _____ ☐ Online ☐ Email

☐ Other: _____