

APPLICATION FOR RENTAL

100 NORTH MAIN APARTMENT HOMES

Last Name	First	M. I.	Birthdate	Driver's License No & State	Soc. Sec. No.
<input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated	Spouse's Name		Birthdate	Driver's License No & State	Soc. Sec. No.
Expected Move-In Date	Apt. to be Occupied by _____ Adults _____ Children		Birthdate	Children's Name & Ages	
Do you have Pet(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	How Many?	Type & Size (Keeping of Pets requires a pet deposit and Owners Consent.)			

RESIDENT HISTORY

Present Address	Apt#	City	State	Zip	How Long?	Area Code -- Phone	Own Rent
Name & Address of Present Landlord or Mortgage Co.						Area Code -- Phone	Monthly Pmt.
Previous Residence Address	Apt#	Previous LandLord or Apt. Community			Area Code -- Phone	How Long?	

PAST YEAR EMPLOYMENT HISTORY

Applicant Employed By:			Supervisor's Name			How Long?	
Address	City	State	Zip	Phone	Position Held/Occupation	Salary \$ _____ per _____	
Previous Employment:			Supervisor's Name			How Long?	
Address	City	State	Zip	Phone	Position Held/Occupation	Salary \$ _____ per _____	
Spouse Employed By:			Supervisor's Name			How Long?	
Address	City	State	Zip	Phone	Position Held/Occupation	Salary \$ _____ per _____	
Spouse Previous Employment:			Supervisor's Name			How Long?	
Address	City	State	Zip	Phone	Position Held/Occupation	Salary \$ _____ per _____	

ADDITIONAL INCOME

Additional Income such as child support, alimony or separate maintenance need not be disclosed unless such Additional Income is to be included for qualifications hereunder.
 Amount of \$ _____ per _____ Source: _____

VEHICLE INFORMATION

No. of Vehicles on Property	Do you have any recreational vehicles, vans, boats, motorcycles, If so, specify _____						
Auto 1 - Make, model, & color	Year	License No.			State		
Financed Thru		Account No.			Monthly Pmt.		
Auto 2 - Make, model, & color	Year	License No.			State		
Financed Thru		Account No.			Monthly Pmt.		

FINANCIAL REFERENCES

Name of Bank or Savings & Loan	Address	City	State	Zip	Area Code - Phone
Checking:					
Savings:					
Name of Parent or Closest Relative	Address	City	State	Zip	Area Code - Phone
Personal Reference (No relatives please)	Address	City	State	Zip	Area Code - Phone

I, the Undersigned, certify that the information given herein is for the confidential use of the Management and is declared to be factual and true. (Management reserves the right to reject any applicant because of misrepresentation.) If this Application is accepted, I will abide by all Rules and Regulations of the Management. I further acknowledge that this deposit will be forfeited in full, as liquidated damages, if I do not accept occupancy on approval of this application. Acceptance of deposit does not imply approval of Applicant and deposit will be returned in event of rejection.

Applicant _____ Date _____
 Applicant _____ Date _____

 Receipt of deposit with Application for Apartment

Date _____ CREDIT/BACKGROUND CHECK - Applicant has submitted the sum of \$ _____ which is a nonrefundable payment for a credit/background check.

Received of Applicant(s) _____ the sum of _____ deposited with application for apartment pending investigation. No tenancy is hereby created. Applicant will be notified upon completion of investigation. Acceptance of deposit does not imply approval of Lessee and deposit in event of rejection of Applicant(s). Deposit will be retained in event of acceptance, regardless of occupancy.

 Management's Agent

100 NORTH MAIN APARTMENT HOMES

RELEASE OF INFORMATION FORM

Name of Applicant: _____

Social Security Number : _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Unit Residing in/applied for: _____ NORTH MAIN, SUITE. _____, OSHKOSH WI 54901

Contact Person: **Dawn Benish - Business Manager** Telephone: **920.230.RENT** Fax: **920.230.3504**

I hereby authorize the full release of the information requested, which includes, but is not limited to the following. It is understood and agreed that a photocopy or FAX of this release form shall be considered the same as if it were the original and carries my full authorization to release the information requested to the above-referenced Management Company and Apartment Community.

- ? Employment Information
- ? Income Information, historical and anticipated
- ? Assets, including earnings
- ? Student status
- ? Rental or Mortgagor history and verification
- ? Credit Report and Criminal Background
- ? Other information which may be needed to process application or complete my certification.

The requested information is critical to determine or maintain my eligibility for the apartment, which I have applied for or in which I live. Please return the requested information as soon as possible.

Applicant's/Tenant's Signature

Date

THANK YOU FOR CHOOSING 100 NORTH MAIN AS YOUR NEW HOME.