



615 N Sherman Ave Suite 23 • Madison, WI 53704 • Phone 608-241-4449 • Fax 608-241-8171

RENTAL APPLICATION

UNIT INFORMATION This is NOT a lease or rental agreement.

The undersigned hereby makes application to rent apartment/unit/number _____ located at _____
Monthly Rent \$ _____ Lease Start Date _____ Lease End Date _____

Earnest Money \$150.00 ___ paid

APPLICANT INFORMATION Each co-applicant (named tenant) must complete a separate Rental Application.

Full Name _____ Cell Phone _____ Home Phone _____

Date of Birth _____ Social Security No. _____ Work Phone _____

Driver's License No. _____ Email _____ Emergency Contact _____

Pets to occupy unit (Number and Kind) _____

Names of Other Persons to occupy unit	Relationship to Applicant	Date of Birth (if under 18)
1.		
2.		
3.		

APPLICANT'S RENTAL HISTORY (For the past two residences)

Have you ever failed to pay rent when due? ___ Yes ___ No

Has an eviction action ever been filed against you? ___ Yes ___ No

If yes, by whom, when, and for what reason? _____

Have you been convicted of a crime involving violence to persons or property in the last three years? ___ Yes ___ No

Have you been convicted of any drug-related offenses in the last three years? ___ Yes ___ No

Do you owe money to your current landlord or any former landlord? ___ Yes ___ No

CURRENT Address _____ City _____ State _____ Zip _____

Since (date) _____ Rent \$ _____ Landlord Name & Phone # _____

PREVIOUS Address _____ City _____ State _____ Zip _____

How long? _____ Rent \$ _____ Landlord Name & Phone # _____



APPLICANT'S EMPLOYER & INCOME

PRESENT Employer _____ Address _____ Phone # _____

Start Date _____ Monthly Pay \$ _____ Hours worked per week _____ Position _____

PREVIOUS Employer _____ Address _____ Phone # _____

How Long? _____ Monthly Pay \$ _____ Hours worked per week _____ Position _____

OTHER SOURCES OF INCOME You do not have to reveal alimony or child support unless you want it considered as part of your income on this application.

Amount	Source	Confirmation Person	Phone
1.			
2.			

APPLICANT'S CREDIT REFERENCES Have you ever filed for bankruptcy? ___ Yes ___ No

PLEASE READ THIS CAREFULLY AND SIGN THIS APPLICATION

The purpose of this application is to determine whether I qualify as a tenant. If my application is approved, the Landlord and I shall sign a written lease or rental agreement. The Landlord and I have no rental agreement until the time that the lease or written agreement is signed.

I have read and understand the application standards and the application process.

I have paid the earnest money deposit. If my application is accepted the full earnest money will be applied to my security deposit. If my application is accepted and I do not sign the lease agreement, I must forfeit \$50 per application of the earnest money to cover processing costs, and the remainder will not be reimbursed until ten days from the date the earnest money check was deposited. If my application is denied, the earnest money will be returned to me.

I hereby authorize the Landlord/Manager to investigate my credit and financial responsibility, income, rental, and eviction history, and the statements made in this application, and to obtain a consumer credit report on me from a consumer reporting agency that compiles and maintains files on consumers on a nationwide basis. My performance under any lease or rental agreement that I may enter into with the Landlord may be reported to such reporting agency.

I acknowledge that the Manager and the agents and employees thereof represents the interests of the Landlord, but they also have a duty to treat all parties fairly and in accordance with fair housing law, and to disclose material adverse facts about the property.

I was given the opportunity to review a sample lease or rental agreement, and the Landlord's rules and regulations. I warrant and represent that I am at least 18 years of age and that all statements herein are true and correct, to the best of my knowledge.

Notice: You may obtain information about the sex offender registry and persons registered with the registry by contacting the Wisconsin Department of Corrections on the Internet at <http://www.widocoffenders.org> or by phone at 877-234-0085.

Signature of Applicant _____ **Date** _____

How did you hear about the apartment/house? _____

Were you referred to Birwood Property Management through a current or pending tenant of Birwood Property Management? ___ Yes ___ No

Please provide his/her name so that we can thank him/her. _____

FOR OFFICE USE ONLY Date application received _____ Accepted ___ Denied ___