

## **RENTAL APPLICATION**

The undersigned hereby makes an application to rent the following property:

Anticipated move date of						
at a monthly rent of \$	and security deposit of \$					
PLEASE TELL US ABO	OUT YOURSELF					
			Home Phone	e ( )		
	Home Phone(  ) Date of Birth					
Applicant Email Address:						
Co-Applicant Name	Co-Applicant Date of Birth					
Co-Applicant Email Address:						
Names of Dependents					· · · · · · · · · · · · · · · · · · ·	
Dependents Date of Birth						
PLEASE GIVE RESIDE	NTIAL HISTORY	(LAST 3 YEAR	S)			
Current Address						Apt#
City		State			Zip	
Month/Year Moved In	Reas	sons for Leaving			Re	ent \$
Owner/Agent			Phone (	)		
Previous Address (last 3 year	rs)				Rent \$_	
Owner/Agent			Phone (	)		
DI EAGE DEGODIDE V		TODY				
PLEASE DESCRIBE YO						
Have you declared bankrupto						
Have you ever been evicted from a rental residence?						
Have you had two or more late rental payments in the past year?						
Have you ever willfully or inte	intionally refused to p	pay rent when due?	Yes	No_		
PLEASE PROVIDE YO	UR EMPLOYMEN	NT INFORMATIO	ON			
Applicant Status:	Full Time	Part Time	Student		_Unemployed	
Employer						
Dates employed		Employed as				
Supervisor Name			Phone (	)		
Salary \$	_per	(If employed b	y above less t	than 12 m	onths, give nar	me & phone of
previous employer or school:						<del>.</del>
If you have other sources of i employer, etc.) who we may income unless you want us to Amount \$	contact for confirmati consider it in this ap	ion. You do not have oplication.	e to reveal alir	mony, chil	d support, or sp	oouse's annua

Page 1 of 3

PLEASE PROVIDE Y	OUR EMPLOYM	ENT INFORMATI	ON		
Co-Applicant Status:	Full Time	Part Time	Stuc	lent	Unemployed
Employer					
Dates employed		Employed a	s		
Supervisor Name			Phone ( )		
Salary \$	per	(If employed	by above le	ess than 12 r	months, give name & phone of
previous employer or scho	ol:				)
	ay contact for confirm s to consider it in this	ation. You do not have application.	ve to reveal	alimony, ch	ource, and person (banker, ild support, or spouse's annua
PLEASE LIST YOUR	REFERENCES				
Personal Reference or E	mergency Contact:				
Name		Address			
Phone ( )		Relationship			
Name		Address			
Phone ( )		Relationship			
Driver's License:					
Applicant Driver's License	Number				State
Driver's License:					
Co-Applicant Driver's Licer	nse Number				State
Vehicle Information:					
Make / Model		Year	Licens	e Plate & Sta	ate
Make / Model	ake / Model		License	e Plate & St	ate
Make / Model		Year	License	e Plate & St	ate
ADDITIONAL INFORI	MATION:				
How did you hear about th	is property?				
Please give any additional	information that migh	nt help owner/manag	ement eval	uate this app	blication?
Do you have a dog? (Our p Yes No	oroperties do not allo	w cats)			
where may we reach you t	o discuss this applica	ation?			
Applicant: Day Phone # ( )		Night Pho	one # (	)	
Co-Applicant: Day Phone # ( )		Night Pho	one # (	)	

that the rental is to be payable the first day of each month in a	
to the agent to accept this application. I warrant that all stater	•
statement made above be a misrepresentation or not a true s the agent's cost, time, and effort in processing my application	
7	
I hereby deposit \$ as earnest mone	
business banking days. Upon acceptance, this deposit shall that and accepted, I agree to execute a lease for	be retained as part of the security deposit. When so approved
	If the application is not approved or accepted by the owner or
agent, the deposit will be refunded, the application hereby wa	
which the owner or agent may reject. I recognize that as a pa	rt of your procedure for processing my application, and
investigative consumer report may be prepared whereby info	_ ·
with whom I may be acquainted. This inquiry includes information characteristics and mode of living.	ation as to my character, general reputation, personal
characteristics and mode of living.	
The above information, to the best of my knowledge, is true a	and correct.
Please sign:	
Name of Applicant	Date
Please sign:	
Name of Co-Applicant	Date
Please return <u>original copy</u> to Key Rentals; P.O. E	Box 181; Kaukauna, WI 54130, fax <u>original copy</u> to
Office Address: N23	35 W41 Frontage Rd.
920-759-9806 AT	TN: Key Rentals
Or e-mail: info@	duplex4rent.com
Any questions regarding application	n please call me at: (920) 419-8303.
APPLICANT: PLEASE DO NOT WRITE BELOW	(FOR OFFICE USE ONLY)
Deposit of \$	
Deposit of $\phi_{\underline{}}$	
Received by	Date
OFFICE NOTES:	

I hereby apply to lease the above described premises for the term and upon the set conditions above set forth and agree