

**Prairie Island Properties**

951 San Juan Drive  
Altoona, WI 54720  
Office: 715-563-0139

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Contact: Cheryl Schmidt - 715-563-0139

**APPLICATION FOR RESIDENCY**

Property Address \_\_\_\_\_ Rent Amt \_\_\_\_\_ Move In Date \_\_\_\_\_

<i>Applicant(s) to Occupy Unit</i>	<i>Date of Birth</i>	<i>Relationship</i>	<i>Telephone</i>
1			
2			
3			
4			

**Email Address**  
1 \_\_\_\_\_ 2 \_\_\_\_\_

**Housing References (2 years worth)**

1. Current Address	_____	Dates Rented	_____
Landlord's Name	_____	Landlord's Telephone #	_____
Reason for Leaving	_____		
Previous Address	_____	Dates Rented	_____
Landlord's Name	_____	Landlord's Telephone #	_____
Reason for Leaving	_____		
2. Current Address	_____	Dates Rented	_____
Landlord's Name	_____	Landlord's Telephone #	_____
Reason for Leaving	_____		
Previous Address	_____	Dates Rented	_____
Landlord's Name	_____	Landlord's Telephone #	_____
Reason for Leaving	_____		

**Employment**

1. Present Employer	_____	Telephone	_____
Address	_____	Position	_____
		Length Employed	_____
2. Present Employer	_____	Telephone	_____
Address	_____	Position	_____
		Length Employed	_____

**Income**  
1. Monthly Income \_\_\_\_\_ 2. Monthly Income \_\_\_\_\_

**Vehicle Description**

1. Make	_____	Year	_____	License Plate	_____
2. Make	_____	Year	_____	License Plate	_____

**Emergency Contact**

1. Name	_____	Relationship	_____	Telephone #	_____
2. Name	_____	Relationship	_____	Telephone #	_____

**Pets**  
Type \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_

Receipt of earnest deposit in the sum of \$\_\_\_\_\_ paid by \_\_\_\_\_ is hereby acknowledged:  
deposit to be returned if application is not approved: If approved, this sum is to be applied to security deposit and/or  
month's rent. If applicant refuses to sign lease after being approved, or doesn't take occupancy, they forfeit their deposit.  
Applicant's consents to routine inquiry of references and credit agencies to provide applicable information concerning  
applicant's character, creditworthiness, reliability, and income amount. Falsification of information will result in  
automatic denial of application. To the best of my knowledge, all the above information is true.

1. Signature	_____	Social Security #	_____	Date	_____
2. Signature	_____	Social Security #	_____	Date	_____