

LACROSSE RENTAL APPLICATION
 (EACH ROOMMATE MUST SUBMIT SEPARATE APPLICATIONS)
APPLICANT INFORMATION

Marital Status (check one): Single Married Divorced Widowed Separated

Applicant Full Name _____
 Home phone: (____) _____ Work Phone: (____) _____

Occupants: (Indicate the number of persons to occupy the apartment - include yourself)

Name	Relationship	SSN #	DL # & State	Birthday
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

RESIDENCY

Current Address: _____ City _____
 ST _____ ZIP _____ How Long _____ Monthly Payments _____
 Landlord or Mortgage Co _____ Phone (____) _____

 Reason for Leaving _____

Previous Address: _____ City _____
 ST _____ ZIP _____ How Long _____ Monthly Payments _____
 Landlord or Mortgage Co _____ Phone (____) _____

 Reason for Leaving _____

EMPLOYMENT

Current Employer: _____ Phone (____) _____
 Address _____ Supervisor _____
 Position _____ How Long _____ Gross Monthly Income _____

Previous Employer: _____ Phone (____) _____
 Address _____ Supervisor _____
 Position _____ How Long _____ Gross Monthly Income _____

Spouse Employer: _____ Phone (____) _____
 Address _____ Supervisor _____
 Position _____ How Long _____ Gross Monthly Income _____

FINANCIAL

Bank: _____ Phone (____) _____ Account # _____

OTHER INFORMATION

Have you ever been evicted or asked to terminate a lease? Have you ever been convicted of a felony?

VEHICLES: (List all vehicles to be parked on the premises by, applicant, spouse, or children.)

Make _____ Model _____ Color _____ Year _____ License # _____ St _____
 Make _____ Model _____ Color _____ Year _____ License # _____ St _____
 Make _____ Model _____ Color _____ Year _____ License # _____ St _____

PETS: (If you have any pets please complete the following.)

Name of pet _____ Type of pet _____ Age _____ Weight _____
 Name of pet _____ Type of pet _____ Age _____ Weight _____

EMERGENCIES: (Person(s) to notify in case of an emergency - other than co-resident) (Authorizes Entry anytime)

Name _____ Relationship _____
 Address _____ City/St/Zip _____
 Phone: Home (____) _____ Work (____) _____

REFERRAL: (How were you referred to us?) Apt Guide Book Drive By Newspaper
 Billboard Yellow Page Internet Friend (Name) _____
 Locator Service (Name) _____

EMAIL ADDRESS: _____

Applicant(s) hereby represents that all the above statements are true and correct and are made to induce Owner to lease or rent apartment and Applicant(s) hereby authorizes verification of references given, including bank account balances, employment and credit information. I (we) agree that I (we) have no right to occupy the apartment until the application is approved and a Rental or Lease Agreement is entered into. Any false statements made above shall be sufficient cause for Owner to cancel and terminate any agreement made with Applicant(s). Owner reserves the right to reject Applicants rental application any time prior to executions and delivery of the Rental or Lease Agreement. In the event of rejection, any holding fee deposited less application fees will be refunded to Applicants. **If Applicant(s) withdraws application prior to execution of Rental or Lease agreement, the holding fee will be forfeited unless written cancellation is received with 24 hours from the date and time indicated below.** If Owner

for any reason cannot deliver possession of the premises to Applicant(s) at the commencement of the term, all fees less application fee paid to Owner shall be refunded to Applicant(s).

Date: _____ Time: _____

Signature of Applicant

Signature of Agent

Signature of Applicant