SUBLET

APPLICATION FOR RESIDENCE Please <u>Print</u> and Complete <u>All</u> Blanks

| Address of apartment preferred | | | | Apt# | |
|--|--------------------------------------|--|--|-------------------|--|
| Type of unit applied for: Efficier | | Bedroom 4 Bedroom | 5 Bedroom Other | | |
| OCCUPANCY TERMS From | To | | | | |
| Persons to occupy apartment | Date of birth | | | | |
| 1 | (self) | | | | |
| 2 | | | | | |
| | | | Apartment Rentals, LLC | | |
| 3. | | — IC | | | |
| 4 | | | 505 N. Carroll St., Suit | e #1 | |
| 5 | | _ ` | P.O. Box 513 | | |
| 6 | | | Madison, WI 53701-05 | 13 | |
| 7 | | | (608)255-8633 (608)255-7509 Fax | | |
| | | | (000)255 7505 2 4.1 | | |
| 8 | | | | | |
| HOUSING REFERENCES (stre | eet, apt. #, city, state, and ZIP co | ode) | | | |
| Present address | | r 11 1 | DI | | |
| How long? Rent_ | Lease expiration | Landlord | Phone_ | | |
| Reason for leaving | | | | | |
| Previous address | T | T J1 J | Dhono | | |
| | Lease expiration | Landlord | Filolie | , | |
| INCOME/SUPPORT | ad list sauras of incomo/sunno | + | Monthly \$ | 2 | |
| If a full-time student or unemployed | A ddress | L | Willing \$ | <u>'</u> | |
| Employer Phone Posit | ion Address | Monthly earnings \$ | Employed:ye | ears mos. | |
| CHARGE ACCOUNTS/OTHER | R CREDIT BA | NKING REFERENCES | Savings | Checking Loan | |
| 1 | | | | | |
| 2. | | | | | |
| 3. | 3. | | | | |
| CREDIT HISTORY (the last sev | en years) | | | | |
| 1. Have you been evicted or had a | | ? Yes No_ | If you answered | "Yes" to any | |
| 2. Have you ever broken a resident | | | of these question | | |
| 3. Are any suits or judgments outst | | | explain any othe | | |
| 4. Have you declared or petitioned | | Yes No | nlease use a sen | | |
| 5. Has a co-tenant or landlord clair | | YesNo_ | paper. | | |
| COSIGNER If requested, will you | provide a creditworthy cosign | er? Yes No | <u> </u> | | |
| 1. Name | Phone (|)Relatio | onship Fax (| _) | |
| Address(street, city, state ZIP) | | | | | |
| RENTER'S INSURANCE COM | PANY | | | | |
| DECEDDED DV | | 0 | THER SOURCE | | |
| REFERRED BY (name and address) | | <u>U</u> | OTHER SOURCE | | |
| · · | | | | 37. 1 | |
| This Application does NOT include amount of parking space available. Y | parking. Parking is a separate | contract from the Lease and | 1 availability is not guaranteed. V | ve have a limited | |
| | | | | | |
| The apartment and/or building may ha that he/she has reviewed and received a | ve lead-based paint and/or lead-ba | sed paint hazards ım and Form 32.08. | _ (applicant's initials). The applic (applicant's initials). | ant acknowledges | |
| | - · · | | | ACEMENT The | |
| THIS IS NOT A LEASE OR SUBLI undersigned will be required to execu | 11 AGREEMENT. ALL APPLIC | ATIONS ARE SUBJECT | e if any to Management as requi | red by the Rental | |
| Agreement. | ne a written Subject Agreement an | id to tender the balance da | o, it may, to management as requi | | |
| | A 11 Company of Landing | is tour and sampat and and | aretands that any misranrasantation | e may be grounds | |
| The undersigned applicant certifies that for canceling any subsequent Lease. | The applicant understands that | is true and correct and und see part of the Management | s normal procedure routine inquit | ries will be made | |
| regarding the applicant's financial stat | The applicant understands that a | reputation. The undersign | ned herewith authorizes the rele | ase of credit and | |
| other relevant information to the Ma | | repaidion 2110 diameters | | | |
| | | ENING VOLID SIGNATIO | RE ACKNOWLEDGES FULL UN | IDERSTANDING | |
| READ AND INITIAL ABOVE, WHE AND AGREEMENT. | ine applicable, before Sic | DIAMO, TOUR SIGNATU | AL ACINOWELDOES FOLL ON | DEROTATION | |
| AND AURDEMENT. | | | | | |
| | | | | | |
| | | | | | |
| Applicant's Signature | | | Date | | |
| Applicant a Dignature | | | | | |
| Soc. Sec. No. | Present Phone | Email Ad | ldress | | |
| (Optional) | | | | • | |