

# RENTAL APPLICATION

One Application for each adult  
Applicant (18 years of age or older)

## Additional Applicant Information

Name \_\_\_\_\_

How many bedrooms do you need? \_\_\_\_\_

When would you like to move in by? \_\_\_\_\_  
(We are only able hold the units for a max of 15 days)

What is the max rent you can afford per month? \$ \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Have you ever been evicted? No \_\_\_\_\_ Yes \_\_\_\_\_  
If "yes" please explain \_\_\_\_\_  
\_\_\_\_\_

Will it be a problem having WE Energies put in your  
name? Yes \_\_\_\_\_ No \_\_\_\_\_  
Tenants MUST have WE Energies services in their name prior to receiving keys.

---

Tenants are responsible for the Milwaukee Water Works water/sewer/solid waste Bill  
(100% for single-family homes and 50% for duplexes/town homes, and 25% for 4 family apartments). When you vacate the unit you  
will be responsible for a pro-rated final water bill. This final bill will be deducted from your security deposit. \_\_\_\_\_  
Initials Here

I understand that if I choose to sign a lease and put down security deposit funds to hold a unit that I will be liable for administrative fees  
to re-rent the unit and may also be liable for rent per day until a full security deposit is secured by ACL Properties, LLC for the unit I  
decided not to take. \_\_\_\_\_  
Initials Here

I understand that if I sign a lease, and am later evicted, per the Residential Rental Agreement-Abandoned Unit paragraph, the landlord  
may dispose of my personal property in any manner that the landlord, in his sole discretion, determines appropriate. (See full text in  
lease.) \_\_\_\_\_  
Initials Here

Tenants which will receive rent assistance with move-in prior to the time that satisfactory inspection is accomplished and approval for  
move-in is granted, the tenant will be responsible for any rent incurred from the time of move-in until the time that satisfactory  
inspection is accomplished. Initial that you have read and understand the above information \_\_\_\_\_  
Initials Here

I understand that if I am not immediately shown a unit upon approval my approval status will be rechecked the day of my showing.  
\_\_\_\_\_  
Initials Here

# RENTAL APPLICATION

One Application for each adult  
Applicant (18 years of age or older)

All Information on the Front & Back of this  
Application must be completed.

You will be denied rental if you misrepresent any information on this  
Application. If misrepresentations are found after a rental agreement  
is signed, your rental agreement will be terminated.

Date \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Applicants Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Other Residents (relationship)	Date of Birth	SSN (if 18 or older)
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Rental History

Current Address _____	How Long _____
Landlord _____	Phone _____
Reason for Moving _____	\$ Rent/ Month _____

Previous Address _____	How Long _____
Landlord _____	Phone _____
Reason for Moving _____	\$ Rent/Month _____

### Employment History

Current Employer _____	Start Date _____
Address _____	Supervisor _____
Position _____	Monthly Income _____
Phone No. _____	

Other Current Employer _____	Start Date _____
Address _____	Supervisor _____
Position _____	Monthly Income _____
Phone No. _____	

If you receive the following, please fill out the amounts in which you receive monthly:

SSI Amount \_\_\_\_\_ Food Stamps \_\_\_\_\_  
Child Support \_\_\_\_\_ other income \_\_\_\_\_

**Total Gross monthly Income (All totals)** \_\_\_\_\_

# RENTAL APPLICATION

One Application for each adult  
Applicant (18 years of age or older)

In Case of Emergency, Notify:

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Relationship \_\_\_\_\_

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

The Applicant acknowledges being furnished copies of the Residential Lease, Rules & Regulations for inspection and, if applicable any Nonstandard Rental Provisions. The Applicant agrees to sign the completed Lease and Rules and Regulations before taking occupancy of the premises. I certify that all of the information provided in the application is true to the best of my knowledge and that my rental agreement maybe terminated if I have made any false or incomplete statements in this application. I authorize verification of the information provided in this application from my credit sources, current & previous landlords, employers and personal references.

Note: A Security deposit is required from every tenant against damage or loss to the premises, and said security deposit cannot be used for the LAST MONTHS RENT.

My Rental of said premises is to be limited to use and occupancy by family of size and description above without any right on my part to sublet all or any of said premises.

I authorize you to contact any reference that I have listed, before, during or after my tenancy.

I hereby certify that all statements made on this application are correct.

---

Signature of Applicant

Date