

TANGLEWOOD APARTMENTS LEASE APPLICATION



9200 S. MEYER LANE, OAK CREEK, WI 53154 PHONE: (414) 761-1001 FAX: (414) 761-0018

The undersigned applicant hereby affirms to the Lessor, TANGLEWOOD APARTMENTS, that all of the information provided by him/her herein is complete, accurate and truthful. APPLICATION WILL NOT BE PROCESSED UNTIL ALL INFORMATION IS PROVIDED

APPLICANT'S FULL NAME:			Date of Birth
PRESENT ADDRESS:	City	State	Zip
TELEPHONE # w/Area Code	Cell #	SOCIAL SECURITY #:	
PREVIOUS ADDRESS:	City	State	Zip
DRIVER'S LICENSE NO:		.OYER:	
EMPLOYER'S ADDRESS:	EMPLOYER'S T	ELEPHONE # w/Area Code:	
SUPERVISOR:	YOUR CURRENT	OCCUPATION:	
NET EARNINGS PER MONTH:	OTHER INCOME PER MO	ONTH (SSI, Child Support, etc):_	
NAME AND ADDRESS OF BANK:			
SAVINGS ACCOUNT NUMBER:	CHECKING AC	COUNT NUMBER:	

ALL PAYMENTS AND OUTSTANDING OBLIGATIONS

Creditor	Original Amount	Current Balance	Monthly Payment

LANDLORD AND/OR MORTGAGEE INFORMATION

PRESENT LANDLORD/MORTGAGEE NAME:	PHONE #			
ADDRESS:	City	State	Zip	
PREVIOUS LANDLORD/MORTGAGEE NAME:		PHON	E#	
ADDRESS:	City	State	Zip	
CURRENT MONTHLY RENT/MORTGAGE PAYMENT: \$				
OCCUPANT				

TOTAL NUMBER OF F	PERSONS TO OCCUPY THE APARTMENT:	18 yrs. or Older?	
OCCUPANT NAME:	RELATIONSHIP	YesNo	
OCCUPANT NAME:	RELATIONSHIP	YesNo	
OCCUPANT NAME:	RELATIONSHIP	YesNo	

VEHICLE INFORMATION					
HOW MANY VE	HICLES WILL BE KEPT AT	THIS ADDRESS:			
MAKE:	MODEL:	YEAR:	LICENSE PLATE#	STATE	COLOR
MAKE:	MODEL:	YEAR:	LICENSE PLATE#	STATE	COLOR
MAKE:	MODEL:	YEAR:	LICENSE PLATE#	STATE	COLOR
MAKE:	MODEL:	YEAR:	LICENSE PLATE#	STATE	COLOR

PET INFORMATION					
TYPE OF PET:	DECLAWED & NEUTERED/S	SPAYED?			
PET AGREEMENT TO BE SIGNED A	ND NON-REFUNDABLE PET FEE TO BE PAID	ON DAY OF MOVE IN			
CRIMINAL HISTORY					
1. Have you ever been convicted of o	pleaded "guilty" or "no contest" to a felony?	NOYES			

2. Have you ever been convicted of or pleaded "guilty" or "no contest" to a misdemeanor involving sexual misconduct? NO YES

Have you or any person listed on this application ever lived at Tanglewood Apartments before?

NOTICE: BY SIGNING THIS APPLICATION, YOU DECLARE THAT ALL OF YOUR RESPONSES ARE TRUE AND COMPLETE. YOUR SIGNATURE AUTHORIZES OWNER TO DO A CREDIT AND BACKGROUND CHECK, INCLUDING BUT NOT LIMITED TO A CONSUMER CREDIT REPORT AND LANDLORD VERIFICATION AND TO VERIFY ALL INFORMATION CONTAINED HEREIN.

ANY FALSE STATEMENT ON THIS APPLICATION CAN LEAD TO REJECTION OF YOUR APPLICATION OR IMMEDIATE TERMINATION OF YOUR LEASE AGREEMENT

APPLICANT SIGNATURE:		D/	ATE:	
Application taken by:		DA	TE:	
		FOR OFFICE USE ONLY		
Proposed Move In Date:		Apartment number:	Date Approved:	
Income:	Credit History:	Landlord Reference:	Date Denied:	
LEASE APP. 10/2009	Reason Denied:		Denied By:	