

TALLARD APARTMENTS LLC

APPLICATION FOR TENANCY

Apartment Address: _____ Apt. #: _____

Monthly Rent (incl. Prompt Payment Discount): _____ Full Monthly Rent (w/o PPD): _____

Security Deposit is equivalent to one full month's rent. Tenancy Term: August 15, 20____, to August 15, 20____.

Landlord is responsible for the following utilities: _____ heat _____ electric _____ gas _____ stove gas only
(Tenant is responsible for those not marked.)
_____ hot water _____ water _____ air conditioning

THIS APPLICATION IS NOT A RENTAL AGREEMENT.

Name of Applicant: _____

(include middle initial)

Daytime Phone Number: _____ Evening Phone Number: _____

E-mail Address: _____

Social Security Number*: _____ Date of Birth*: _____

* For credit report access only.

Pets (number and kind): _____

HOUSING REFERENCES

1. Present Street Address: _____

City: _____ State: _____ Zip: _____ Monthly Rent: _____

Landlord's Name/Address: _____ Phone: _____

Date Moved In: _____ Date Moved Out: _____ Reason for Leaving: _____

2. Previous Street Address: _____

City: _____ State: _____ Zip: _____ Monthly Rent: _____

Landlord's Name/Address: _____ Phone: _____

Date Moved In: _____ Date Moved Out: _____ Reason for Leaving: _____

(Tallard Apartments LLC requires a minimum of one full year's rental history, or an approved co-signer may be required for acceptance.)

INCOME/EMPLOYMENT REFERENCES

Tallard Apartments LLC requires a minimum income standard of three times your total gross monthly income. Exceptions include, but are not limited to, at least one year previous rental history where less than this standard has been met, and rent was paid on time and in full. Less than this requirement may require a co-signer for approval of this application.

Employer: _____ Position: _____

Supervisor: _____ Phone: _____ Start Date: _____

Average Monthly Income: _____

If you have other sources of income you would like us to consider, please list the income amount, source, and person we may contact for verification. You are not required to list alimony, child support, or spouse's annual income unless you want those amounts considered for purposes of this application.

(more on back)

Source of Income: _____ Gross Amount per Month: _____

Name for Verification: _____ Phone: _____

Applicant's Total Gross Income per Month: _____

BANKING REFERENCES

Checking Account - Name/Location: _____ Savings Account - Name/Location: _____

Loans - Name/Location: _____

CREDIT REFERENCES (list name, account numbers, and state of credit cards, utilities, etc.)

1. _____ 2. _____

IN CASE OF EMERGENCY CONTACT

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

OTHER INFORMATION

Have you ever been evicted or been served an eviction notice? _____ yes _____ no
Are you a smoker? _____ yes _____ no
Have you been convicted of a felony in the last three years? _____ yes _____ no If yes, for what? _____
Do you owe money to a previous landlord? _____ yes _____ no If yes, who? _____
Has a current tenant of ours referred you to us? _____ yes _____ no If yes, who? _____
How did you hear about Tallard Apartments LLC? _____

If you currently live in UW Housing, or have less than one year of rental history, complete co-signer information:

Co-signer Name: _____ Relationship to Applicant: _____

Address: _____ Fax: _____

City: _____ State: _____ Zip: _____ Phone: _____

Co-signer e-mail address: _____

At the time of entering into a rental agreement, the applicant agrees to pay the balance of the security deposit. The applicant consents to a routine inquiry of references, credit, and statements made on this application. This application is subject to the approval of the landlord or agent. Disclosure of your social security number is optional. This application will not be denied for failure to disclose your social security number. ***False, inaccurate or incomplete information may result in the rejection of this application.*** Applicant acknowledges that the Manager and the agents and employees thereof represent the interests of the Landlord, but they also have a duty to treat all parties fairly and in accordance with fair housing law, and to disclose material adverse facts about the property. Notice: You may obtain information about the sex offender registry and persons registered with the registry by contacting the Wisconsin Department of Corrections on the Internet at www.widocoffenders.org or by phone at 877-234-0085.

A NON-REFUNDABLE earnest money deposit of \$300 (eff, 1 or 2 BR's), \$450 (3 or 4 BR's), or \$600 (5 BR's and up) is required to hold an apartment and initiate the lease/rental process. All applications are required within 24 hours of putting a hold on an apartment. This deposit will be credited towards the security deposit at the time of lease signing. A lease must be signed within (3) three business days of application approval, or the hold expires, the apartment is remarketed, and the earnest money is forfeited. If any application is not accepted, the earnest money deposit will be returned within 21 days. Sublesses are not required to submit an earnest money deposit with Tallard Apartments LLC.

APPLICANT'S SIGNATURE: _____ **DATE:** _____

Please return to: Tallard Apartments LLC, 1445 Regent Street, Madison, WI 53711
phone (608) 250-0202 fax (608) 256-5906
www.tallardapartments.com

Do you wish to receive a written explanation of a denial of tenancy: _____ yes _____ no