



**URBAN PROPERTIES**  
 2020 Eastwood Dr.  
 Madison, WI 53704  
 608.233.6000

## Rental Application

Property Name:	Apt. #:	Move-In Date:	Lease End Date:
How did you hear about us?		Rent Amount:	
Where you referred by a current resident?			
<b>Applicant Information</b>			
Name:			
Date of birth:	SSN:	Phone:	
Email:	Driver's License No./State Issued:		
List all names and ages of occupants who will be living with you:			
Do you or any members of your household own a pet now or intend to?      Yes      No			
If yes, please provide details (breed, weight, name)			
Current address:			
City:	State:	ZIP Code:	
Own    Rent    (Please circle)	Monthly payment or rent:	How long?	
Management Company/Landlord:	Phone/Email:	Fax:	
Previous address:			
City:	State:	ZIP Code:	
Owned    Rented    (Please circle)	Monthly payment or rent:	How long?	
Management Company/Landlord:	Phone/Email:	Fax:	
<b>Employment Information</b>			
Current employer:			
Employer address:		How long?	
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly    Salary    (Please circle)	Annual income:	
<b>Other Sources of Income (include all sources of income you want to be considered in this application)</b>			
Source:		Gross Monthly Income	
Source:		Gross Monthly Income	
<b>Emergency Contact</b>			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
<b>Vehicle/Parking Information</b>			
Do you own a vehicle?    Yes    No	License Plate No. & State Issued:		
Make:	Model:	Color:	
Do you want parking (If available. Price varies per property)**?    Yes    No		Do you want a second parking space?    Yes    No	
Do you want storage (If available. Price varies per property.)*?    Yes    No			



**Eviction Background**

Have you ever been evicted?	Yes	No
Have you ever received a 5 day notice?	Yes	No
If Yes, please explain:		

**Criminal Background**

Have you ever been convicted of, plead guilty, or no contest to any felony, misdemeanor, or ordinance violations, other than non-alcohol traffic violations?	No	Yes
If Yes, please explain:		

**Application Authorization**

I have paid Earnest Money which will be utilized towards my Security Deposit if the Landlord enters into a lease with me. If this application is rejected or withdrawn prior to approval, the Earnest money and any subsequent payments will be refunded. If this application is approved, the earnest money is not refundable.

I understand that upon approval of this application I will receive lease documents per terms agreed upon by myself and Prime Urban Properties. Upon receipt of acceptable documents, I will return the completed and signed lease documents within five business days of receipt. The balance of the security deposit is due upon lease signing.

I hereby authorize the Landlord to investigate now, and if required, in the future my credit and financial responsibility, income, and rental history, and any of the statements made in this application, through any means available, either public or private. I further authorize the Landlord to obtain a consumer credit report from a consumer reporting agency. My performance under any Lease that I may enter into with the Landlord may be reported to such reporting agency.

I warrant and represent that all information and answers to above questions are true and complete to the best of my knowledge. I understand that providing false and/or misleading information (including omissions), now or later, will be grounds for denial of my application and/or Lease. I understand my occupancy is contingent upon meeting management's tenant selection criteria.

I understand that upon approval of this application I will need to acquire and provide proof of renter's insurance. I understand that if I do not provide this documentation before the time of my scheduled move-in to the apartment, I can be denied entry by Landlord.

As required by state law, you are hereby notified that 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 <http://widocoffenders.org> or by phone at (877) 234-0085

Date:	Applicant's Signature:
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**Application Criteria**

I have received the application approval criteria, and I understand there are fees associated with pets, parking, and storage and have received those amounts.

Date:	Applicant's Signature:
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