



MORGENSON

MORGENSON REALTY COMPANY, INC.
P.O.Box 180560 – Delafield, WI 53018
(262) 646-2987

APPLICATION FOR RESIDENCY

Thank you for applying for residency with Morgenson Realty Company, Inc. To insure prompt processing of your application, please print clearly and provide complete names, addresses and phone numbers where requested. Should you have any questions, please feel free to contact your rental agent.

Property Name: _____
Property Address: _____
Apartment No: _____
Net Rent: \$ _____ Security Deposit: \$ _____
Lease Term From _____ to _____
Utilities Included: _____

Each adult over 18 years of age must complete an application for residency. All requested information must be completed before this application will be processed.

NAME OF APPLICANT

(First, middle, and Last)

SOCIAL SECURITY

DRIVERS LICENSE

STATE

1. * _____

Applicant E-Mail Address: _____ Applicants' Maiden Name: _____

Date of Birth: _____ Home Phone: _____ Cell Phone: _____ Work Phone: _____

Mother's Full Name: _____ Father's Full Name: _____

Parent's Address: _____ Parent's Phone: _____

NAMES OF PERSONS TO OCCUPY APARTMENTS (List applicant under #1):

Over 18 Years Old?

1. *	Relationship: *	APPLICANT	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	Relationship:	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	Relationship:	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	Relationship:	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

APPLICANTS VEHICLE (S)

1. Make: _____ Model: _____ Year: _____ License plate #: _____

2. Make: _____ Model: _____ Year: _____ License plate #: _____

HOUSING

Current Address (Including Zip Code): _____

Current Rent: \$ _____ Lease Term: From _____ To _____

Landlord Name: _____ Landlord Phone: _____

Reason for Leaving: _____

Previous Address: _____

Dates at this address: From _____ To _____ Landlord's Name: _____

Landlord's Phone: _____ Best time to call: _____

EMPLOYMENT

List your Occupation: _____ Net Monthly Salary: _____

Your Employer: _____ Hours Per Week: _____

Employer's Address (including zip code): _____

Supervisor's Name: _____ Supervisor's Phone: _____

Dates of Employment: From _____ To _____ Permanent Position: Yes No

Previous Employer: _____ Hours Per Week: _____

Previous Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone: _____

Dates of Employment: From _____ To _____ Permanent Position: Yes No

MISCELLANEOUS

Do you have any pets? Yes No Do you plan on having any pets? Yes No
Do you have renter's insurance? Yes No Do you smoke? Yes No
How did you learn about our apartments?
 Newspaper Renting Magazine Internet Drive By Resident Referral - Resident Name: _____

Do you have a pending bankruptcy case and/or have you filed bankruptcy within the prior year? Yes () No ()
Have you ever had an eviction action filed against you? Yes () No ()
Do you know of anything which may interrupt your income or ability to pay rent? Yes () No ()
Have you ever changed your name? Yes () No ()

If your answer was YES to any of the above questions, please provide complete details on a separate page.

EMERGENCY CONTACT (Must be local) PARENTS OR CLOSEST RELATION

Name: _____ Phone Number: _____
Address: _____

EMERGENCY CONTACT (Must be local)

Name: _____ Phone Number: _____
Address: _____

We require a \$100 earnest money deposit be provided along with this application. I have re-examined the information I have provided on this form and agree it is true and complete. I have never been, nor am I being dispossessed or evicted from any rental unit. I have never broken in any manner or failed to honor a lease or lease agreement. My credit record is good with no judgments against me.

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 <http://offender.doc.state.wi.us/public/> or by phone at 877-234-0085. The rental of this property is limited to the use and occupancy by the individuals listed above without any right to sublet any or all of the property. You may request in writing within seven (7) days after delivery of the rental unit a list of physical damages or defects, if any, charged to the previous tenant's security deposit.

I acknowledge being furnished copies of the Rental Agreement, Rules and Regulations and Non-Standard Provisions. I agree to sign the Rental Agreement, Rules and Regulations and Nonstandard Rental Provisions prior to taking occupancy.

Please Note: Landlord is using public records provided by a third party service to determine your eligibility to rent. Neither Landlord, nor the third party service, can vouch for the accuracy of the records as they have no control over such records. It is your responsibility to check the accuracy of your own public records.

I understand that this application is subject to your approval based primarily upon the above information, and that if any information is **FALSE**, my application will be denied. If the information is correct, but I am not accepted, my earnest money deposit will be returned to me within fifteen (15) business days. I also understand that this Application is not a lease and should I be accepted, I will sign your lease form and other rental documents **within seven (7) days from the application date**. If my application is approved, my earnest money deposit will be applied to the security deposit or the first month's rent. If I am accepted and fail to sign my lease and other rental documents, my earnest money deposit may be forfeited as allowed by law, subject to the landlord's duty to mitigate my damages.

I hereby authorize **Morgenson Realty Company, Inc.** to do the following: (1) contact any individuals and/or businesses listed on this application and verify all of the information provided in this application before, during, and/or after my tenancy. (2) Obtain a copy of my consumer credit report, and (3) obtain a criminal background report. I further authorize **Morgenson Realty Company, Inc.** to make future credit inquiries in regards to continued credit worthiness and collection of unpaid rent and damage to premises.

Applicant Signature: _____ **Date:** _____

Morgenson Realty Company, Inc. strongly believes in protecting the confidentiality and security of information we collect about you. We treat information about current and former tenants and their accounts in a confidential manner. Our employees may access information and provide it to third parties when completing a transaction at your request or providing other services to you. In addition, our employees and professional service representatives are required to comply with our established information confidentiality provisions. We may disclose information to attorneys, accountants and others who perform services for us on our behalf. **Morgenson Realty Company, Inc.** has permission from the applicant to disclose any information at the request of any other rental agency where applicant may apply in the future.

OFFICE USE ONLY

Receipt in the sum of \$ _____ is hereby acknowledged, by _____