
Date & Time Received
Site Manager Only

La Crosse Students RENTAL APPLICATION

(Property Name)

Please Print

List each person who will live in the apartment or townhouse (start with yourself).

Those who are over the age of 18 will need to fill out a separate application.

NAME Last, First, Middle Initial	DATE OF BIRTH	RELATIONSHIP TO YOU	SOCIAL SECURITY NUMBER **	DRIVER LICENSE NUMBER	ANNUAL INCOME
		Head			

- | | | |
|---|---------|--------|
| 1. Do have a need for an accessible unit? | Yes ___ | No ___ |
| 2. Have you been displaced due to gov't action or presidentially declared disaster? | Yes ___ | No ___ |
| 3. Does anyone live with you now who is not listed above? | Yes ___ | No ___ |
| 4. Do you expect any change in your household composition? | Yes ___ | No ___ |
| 5. Are you enrolled as a student at an institution of higher education? | Yes ___ | No ___ |
| 6. Does anyone outside of your household pay for any of your bills or give you money? | Yes ___ | No ___ |
| 7. Have you ever been convicted of a felony, misdemeanor, or crime? Or do you have any pending legal charges against you? | Yes ___ | No ___ |
| 8. Are you or any member of your household subject to a lifetime sex offender registration requirement in any state? | Yes ___ | No ___ |
| 9. Have you ever been evicted or had a judgement for an Unlawful Detainer? | Yes ___ | No ___ |
| 10. Have you or any member of your household ever resided in another state? Yes, please list state(s) below. | Yes ___ | No ___ |

If you answered Yes to any of the above question please explain:



Current Address:

Street Address: _____

City: _____ State: _____ Zip Code: _____ Apt. No: _____

Daytime Phone: _____ Evening Phone: _____

Email Address: _____

Present Landlord: _____ Landlord's Phone Number: _____

Landlord's Address: _____

City: _____ State: _____ Zip Code: _____ Apt. No: _____

Rent Rate: \$ _____ From: _____ To: _____

Previous Address:

Street Address: _____

City: _____ State: _____ Zip Code: _____ Apt. No: _____

Daytime Phone: _____ Evening Phone: _____

Present Landlord: _____ Landlord's Phone Number: _____

Landlord's Address: _____

City: _____ State: _____ Zip Code: _____ Apt. No: _____

Rent Rate: \$ _____ From: _____ To: _____

Current Employer: _____ Position: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Supervisor: _____ Phone Number: _____

From: _____ To: _____

Would you like a copy of this property's Tenant Selection Plan? Yes No

How did you hear about the property? Please circle

Newspaper Television Internet Site Sign Radio Telephone Book Friend / Relative

Other: _____

APPLICANT CERTIFICATION: I acknowledge that Paramark Corp. will be collecting information on me regarding housing eligibility. Verifications and inquires that may be requested include, but are not limited to: employment, income and assets, credit and criminal activity, residences and rental activity. The resources that may be asked to release this information include but are not limited to: previous landlords, public housing agencies, past and present employers, utility companies, law enforcement agencies, banks and other financial institutions, credit providers and other credit bureaus.

I certify that the statements made on this application are true and complete to the best of my knowledge and belief. I understand that providing false statements or incomplete information may result in punishment under Federal Law.

APPLICANT SIGNATURE

DATE

