

PRINT

DOCKEN MANAGEMENT CO, INC.

Application for Tenancy

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Address of apartment _____ Tenancy Term : _____ to: _____

Rent \$ _____ Security Deposit: Equivalent to 1/2 Month Rent

NAME OF APPLICANT _____ (Include middle initial)

Phone Number _____ e-mail address _____

Social Security Number * _____ Date of Birth * _____

* For credit report access only

NAME(S) OF OTHER PERSONS TO OCCUPY APARTMENT/ AGE IF MINOR

- _____
- _____
- _____

**APPLICATION WILL NOT BE
CONSIDERED UNLESS
COMPLETELY FILLED OUT
AND SIGNED!**

PETS (number and kind) _____

HOUSING REFERENCES (Minimum LAST 2 years)

1. Current Address _____

City _____ State _____ ZIP _____

Amt. Of Rent _____ Dates of Residency _____

Reason for leaving _____

Landlord _____ Phone Number _____

2. Previous Address _____

City _____ State _____ ZIP _____

Amt. Of Rent _____ Dates of Residency _____

Reason for leaving _____

Landlord _____ Phone Number _____

3. Previous Address _____

City _____ State _____ ZIP _____

Amt. Of Rent _____ Dates of Residency _____

Reason for leaving _____

Landlord _____ Phone Number _____

INCOME/EMPLOYMENT REFERENCES

1. Current Employer _____
 Position _____ Phone Number _____
 Supervisor _____ How long at this position _____
 Monthly Income _____

2. Previous Employer _____
 Position _____ Phone Number _____
 Supervisor _____ How long at this position _____
 Monthly Income _____
 Source of Income if Other than Employment: _____ Gross amount per month _____
 Name for Verification _____ Phone _____

VEHICLE INFORMATION

Drivers License Number _____ Issuing State _____
 Make _____ Model _____ Year _____ License Plate No. & State _____

EMERGENCY CONTACT PERSON (other than persons listed on application)

Name _____ Relationship _____ Address _____
 City _____ State _____ ZIP _____ Phone _____
 Can we contact this person in the event of an emergency? Yes No

OTHER INFORMATION

Have you ever been evicted or been served an eviction notice? YES NO
 Have you ever filed for Bankruptcy? YES NO

This application is not an apartment lease, contract or rental agreement. The applicant consents to a routine inquiry of reference and credit agencies. This inquiry will provide applicable information concerning the applicant's credit worthiness and reliability. At applicant's request, landlord will advise if a credit report is requested and the name and address of the credit reporting agency. Applicant acknowledges receipt of a copy of this application with disclosures below as part thereof which may be applicable.

This application is subject to the approval of the owner or managing agent. False, inaccurate, or incomplete information may result in the rejection of this application.

APPLICANT'S SIGNATURE _____ **Date** _____

How did you hear about us? Website: Please Choose One Referred By:
 Other:
 Walk-In

LANDLORD DISCLOSURES AND REQUIREMENTS

Items one through ten below are required of a landlord/agent by the State of Wisconsin and all items are required by the City of Madison prior to entering into a rental agreement with a tenant and/or prior to accepting earnest money or a security deposit. Other governmental jurisdictions may have additional laws and regulations that apply.

TENANT/APPLICANT ACKNOWLEDGES HAVING BEEN ADVISED:

1. A receipt for earnest money, if applicable, collected has been given tenant.
2. That the landlord shall have up to twenty-one (21) calendar days from acceptance of the earnest money deposit to approve or deny the rental application.
3. That copies of the proposed lease, non-standard rental provisions and rules and regulations of the landlord have been made available to tenant for inspection.
4. Of the name and address of the person authorized to receive rent, manage and maintain the premises who can readily be contacted and an owner or agent with an address within the state authorized to receive and receipt for notices and demands and at which service of process can be made in person. (See Above)
5. Of utility charges not included in the rent. (See Reverse)
6. I/we have been advised that the Landlord has actual knowledge of the following uncorrected building code or housing violations that present a significant threat to the prospective tenant's health or safety: NONE
7. That the premises contain the following conditions adversely affecting habitability: NONE
8. Not less than seven (7) days after the start of the tenancy, tenant may request, in writing, that landlord provide tenant with a list of physical damages or defects, if any, charged to the previous tenant's security deposit.
9. Landlord promises to repair, clean, or improve the premises as follows by the completion dates noted: NONE
10. Security Deposits may be withheld for tenant damage, waste, or neglect of the premises or the nonpayment of rent, utility services, or mobile home parking fees for which the landlord becomes liable and other reasons specifically and separately negotiated and agreed to by tenant in the nonstandard rental provisions form.

THE FOLLOWING DISCLOSURES APPLY TO THE CITY OF MADISON ONLY:

11. that a copy of notice of eligibility for rent abatement, if any, which affects the rental unit or common areas, has been provided to the tenant;
12. that the occupancy limit imposed upon the dwelling unit by 27.06 of the City of Madison General Ordinances is _____
13. that the definition of a "family" pursuant to 28.03(2), City of Madison General Ordinances, is as follows: "A family is an individual or two or more persons related by blood, marriage, or legal adoption living together as a single housekeeping unit in a dwelling unit, including foster children, and not more than four (4) roomers except that the term 'family' shall not in R1, R2, R3, R4A and R4L residence districts include more than one roomer except where such dwelling unit is owner occupied. For the purpose of this section, 'children' means natural children, grandchildren, legally adopted children, stepchildren, foster children, or a ward as determined in a legal guardianship proceeding.
Up to two (2) personal attendants, who provide services for family members or roomers who, because of advanced age or a physical or mental disability, need assistance with activities or daily living, shall be considered part of the 'family'. Such services may include personal care, housekeeping, meal preparation, laundry or companionship;"
14. that the zoning district in which the dwelling unit is located is _____; and,
15. that the off-street parking requirements of the dwelling unit pursuant to 28.11 City of Madison General Ordinances is _____ Except in the "central area" as per section 28.07(1)(g) of the City of Madison General Ordinances.
16. that within 30 days, you may submit a written request to the Landlord to view the photographs maintained by the landlord which document the physical damages or defects that were charged to the security deposit of the previous tenant(s).

APPLICANT'S SIGNATURE _____ **DATE** _____

CRITERIA FOR APPLICANT APPROVAL

1. **Income**
- A. Income must be verifiable and acquisition of said income must be lawful.
 - B. Monthly income must be continuous to satisfy all months of the lease term.
 - C. Co-Signer may be used to cover lack of income.

2. **Rental Reference Criterion Required**
- A. The previous 2 years of tenancy must be accounted for and verified.
 - B. Rent must have been paid on time.
 - C. No noise problems or other disturbance complaints from police, landlord, or other residents.
 - D. There must have been no damage upon leaving prior tenancy.
 - E. There must not have been cleaning charges in excess of \$50.00.
 - F. Must not have been evicted or been refused renewal of a lease.
accept a Co-Signer in either of these cases. (Exception: Non-Renewal on Sale of Property.)
 - G. Must not owe any other Landlord money or have abandoned a prior residence before the lease term was up. We cannot accept a Co-Signer in either of these cases.

3. **Credit Check and Criminal Background Check**
- A. Must have no more than one account current or previously in collections. We will review your credit using TransUnion to evaluate your credit history. More than one account in collections will result in automatic denial of all application(s). We reserve the right to consider medical account exceptions.
 - B. Lack of credit rating is acceptable.
 - C. Criminal background check of convictions within the past 3 years that affect other people or property, such as manufacturing / distribution of drugs, disorderly conduct, violence or sexual offenses. Time limits on exclusions apply unless the offense is one reported under the Sex Offender Reporting Requirement of sec 973.048, Wis. Stats. For properties located in the City of Madison we will comply with the requirements of MGO 39.09(4) (d).
 - D. We cannot accept a Co-Signer to cover criminal history or bad credit.

4. **Occupancy Standards**
- 1. Two adults maximum per bedroom.
 - 2. If applicants are immediate family: maximum of four persons per 2 bedrooms apartment.
 - 3. If applicants are immediate family: maximum of six persons per 3 bedroom apartment.

5. **Co-Signer Requirements**
- A qualified Co-Signer must have approve-able credit history as outlined above and financial ability to pay applicant(s) rent in case of default.

I have read and understand the above criteria for application approval.

Signature: _____ Date: _____