



OAKVIEW ASSOCIATES, LLC Application

2025 Wyoming Ave. # 1
Sun Prairie, WI 53590

T. (608) 837-8369
Fax. (608) 837-2703

Colonial Management, LLC must have a completed application for each adult (18 years of age or older) who will be living in the residence. All requested information must be completed (including unit applying for) and the disclosure form must be signed and returned with \$100.00 Earnest Money, before the application will be processed.

** Special offered if application returned within 24 hours of viewing apartment.

RENTAL AGENT TO COMPLETE

TODAY'S DATE: _____ Move-In Date: _____ Lease Term: _____

ADDRESS APPLYING FOR: _____

SECURITY DEPOSIT: \$ _____ MONTHLY RENT: \$ _____ PARKING RENT: \$ _____ PET FEE: \$ _____

APPLICANT INFORMATION

FULL NAME: _____ ★ SOCIAL SECURITY NUMBER: _____ - _____ - _____
First Middle Last

★ TIN NUMBER: _____

HOME TELEPHONE: _____ MOBILE NUMBER: _____ WORK NUMBER: _____

DRIVERS LICENSE #: _____ STATE: _____ ★★ DATE OF BIRTH: ____/____/____

Applicant must have a valid driver's license if you wish to apply for parking.

★ *Optional: Is used to determine credit worthiness. (If optional information is not provided and credit report is inaccurate or insufficient, COLONIAL MANAGEMENT, LLC may ask for further information or the application may be denied.)*

★★ **REQUIRED** - Date of birth for credit report and background checks reference only.

HOUSING INFORMATION

YOU MUST HAVE TWO (2) COMPLETE YEARS OF HOUSING REFERENCES WITH NO GAPS IN DATES

CURRENT ADDRESS: _____
Street Apartment # City State Zip

DATES AT ADDRESS - FROM: ____/____/____ TO: ____/____/____ MONTHLY RENT: \$ _____

LANDLORD'S NAME: _____ LANDLORD'S PHONE #: _____

PREVIOUS ADDRESS: _____
Street Apartment # City State Zip

DATES AT ADDRESS - FROM: ____/____/____ TO: ____/____/____ MONTHLY RENT: \$ _____

LANDLORD'S NAME: _____ LANDLORD'S PHONE #: _____

PREVIOUS ADDRESS: _____
Street Apartment # City State Zip

DATES AT ADDRESS - FROM: ____/____/____ TO: ____/____/____ MONTHLY RENT: \$ _____

LANDLORD'S NAME: _____ LANDLORD'S PHONE #: _____

INCOME INFORMATION

SOURCE OF INCOME: _____ CONTACT'S NAME: _____

ADDRESS: _____

CONTACT'S TELEPHONE: _____ START DATE: _____ POSITION: _____

GROSS MONTHLY INCOME: \$ _____ HOURS WORK PER WEEK: _____

SOURCE OF INCOME: _____ CONTACT'S NAME: _____

ADDRESS: _____

CONTACT'S TELEPHONE: _____ START DATE: _____ POSITION: _____

GROSS MONTHLY INCOME: \$ _____ HOURS WORK PER WEEK: _____

ADDITIONAL OCCUPANTS

APPLICANT: _____ Over 18 years old? YES NO (please circle one)
NAME: _____ RELATIONSHIP: _____ D.O.B: ____ / ____ / ____ SOC. SEC. #: ____ - ____ - ____
NAME: _____ RELATIONSHIP: _____ D.O.B: ____ / ____ / ____ SOC. SEC. #: ____ - ____ - ____
NAME: _____ RELATIONSHIP: _____ D.O.B: ____ / ____ / ____ SOC. SEC. #: ____ - ____ - ____
NAME: _____ RELATIONSHIP: _____ D.O.B: ____ / ____ / ____ SOC. SEC. #: ____ - ____ - ____

VEHICLE INFORMATION

MAKE: _____ MODEL: _____ YEAR: _____ LICENSE PLATE #: _____ STATE: _____
MAKE: _____ MODEL: _____ YEAR: _____ LICENSE PLATE #: _____ STATE: _____

PET INFORMATION

LIMIT TWO CATS PER APARTMENT / ONE DOG IF APPLICABLE

TYPE OF PET #1: _____ NAME: _____ AGE: _____ BREED: _____
DATE SPAYED/NEUTERED: _____ DATE OF LAST VACCINATIONS: _____ DECLAWED?: _____
TYPE OF PET #2: _____ NAME: _____ AGE: _____ BREED: _____
DATE SPAYED/NEUTERED: _____ DATE OF LAST VACCINATIONS: _____ DECLAWED?: _____
VETERINARIAN: _____ ADDRESS: _____ PHONE: _____

MISCELLANEOUS

DO YOU OWN/HAVE A WATER BED? YES OR NO IF YES, DO YOU HAVE WATERBED INSURANCE? YES OR NO
DO YOU HAVE RENTER'S INSURANCE? YES OR NO
HAVE YOU OR ANY OTHER PERSON NAMED ON THIS APPLICATION BEEN EVICTED OR ASKED TO LEAVE? YES OR NO
HAVE YOU OR ANY OTHER PERSON NAMED ON THIS APPLICATION BEEN CONVICTED OF A FELONY IN THE PAST TWO YEARS?
YES OR NO IF YES, PLEASE EXPLAIN: _____
DO YOU EXPECT TO ADD ANY HOUSEHOLD MEMBERS DURING THE TERM OF THIS LEASE? YES OR NO
DO YOU WISH TO RECEIVE WRITTEN EXPLANATION OF DENAL OF TENANCY? YES OR NO
WHERE DID YOU FIND OUT ABOUT THIS APARTMENT? _____

EMERGENCY CONTACT

NAME: _____ RELATIONSHIP: _____
ADDRESS: _____
DAYTIME PHONE: _____ EVENING PHONE: _____

SIGNATURES

★FALSIFICATION OF ANY INFORMATION ON THIS APPLICATION IS GROUNDS FOR DENIAL★

The fair CREDIT REPORTING ACT requires that COLONIAL MANAGEMENT, LLC notify you that as part of our normal procedure a routine inquire will be made. This inquiry will provide applicable information character, general reputation, personal characteristics and mode of living and will include a CREDIT BUREAU REPORT.

APPLICANT'S SIGNATURE

DATE

RENTAL AGENT SIGNATURE

DATE



Oakview Garden Apartments

2025 Wyoming Ave Apt 1
Sun Prairie, WI 53590

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Oakview Garden Apartments must have a completed application for each adult (18 years of age or older) who will be living in the residence. Incomplete application(s) will not be accepted. Applicant(s) must apply for the specific address on their application or it will be considered an incomplete application. Two (2) forms of ID must be shown, one of which must be a photo ID. A valid drivers license must be presented if applicant is applying for parking on the premises.

OAKVIEW GARDEN APARTMENTS WILL CHECK THE FOLLOWING WHEN PROCESSING THE APPLICATION:

- **HOUSING:** Oakview Garden Apartments will check references for applicant's last Two (2) years of recent Landlord references. Applicant(s) must fill in their exact address for the last two (2) complete years of housing. Applicant(s) must fill in the Landlord's name (either the owner or property/resident manager). Applicant(s) cannot give the name of a roommate that does not own or manage the property. If applicant(s) is related by blood or marriage to one of the previous landlord(s) listed, or their rental history does not include at least one year of previous landlord(s), Colonial Management, LLC may require a qualified co-signer on applicant(s) rental agreement. It is applicant's responsibility to provide Colonial Management, LLC with the information to contact their past landlords. Colonial Management, LLC reserves the right to deny applicant's application if, after making an effort of good faith, Colonial Management, LLC is unable to verify applicant's rental history. If a Landlord refuses to give a reference, it may be basis for denial of applicant(s) application. Poor Landlord references may also result in the denial of applicant(s) application.
- **EVICTION:** Applicant(s) application will be automatically denied if they have been evicted within the last One (1) years.
- **CREDIT:** Applicant(s) credit history must be satisfactory to Oakview Garden Apartments standards. Credit checks are completed through TransUnion®. An applicant's application will be automatically denied if they still owe money to a past or present Landlord.
- **CONVICTION RECORD:** Applicant's conviction record must be satisfactory to Colonial Management, LLC standards. An applicant's application will automatically be denied if applicant(s) have a history, conviction, sentenced or released from prison or jail within the last two (2) years for any of the following reasons:
 1. Disturbance of Neighbors
 2. Destruction of or Criminal damage to property
 3. Drug Related Criminal Activity
 4. Theft
 5. Criminal Activity involving violence to persons or property
- **INCOME:** Oakview Garden Apartments must be able to verify the amount and stability of applicant's income.

DENIED APPLICATION

Applicant(s) will be denied if they misrepresent any information on this application. If misrepresentations are found after a rental agreement (lease) is signed, the applicant's rental agreement will be terminated. Oakview Garden Apartments reserves the right to ask for additional information if needed.

AUTOMATIC DENIAL –(but not limited to)

1. Eviction in the last one (1) years
2. Poor Landlord references
3. Owes money to a Landlord
4. Poor Criminal Record Check
5. Falsification of Information

APPROVED APPLICATIONS

If applicant's application is approved, the applicant must sign the lease within 24-hours of acceptance or their application may become null and void and Oakview Garden Apartments will process the next application in line. Current tenants may or may not have the right to renew first, if a new lease has not yet been signed.

Maximum person per unit: two (2) persons allowed per bedroom.

One Hundred Dollars (\$100) Earnest Money must receive with an application before Oakview

Garden Apartments can process the application. If the application is accepted, the \$100 will go towards the applicant's first month's rent. If the application is denied, or if the applicant no longer wants the apartment, the \$100 will be returned. Colonial Management, LLC accepts the first qualified applicant. **NO CASH PAYMENTS ARE ACCEPTED.**

SECURITY DEPOSIT is due in full at the lease signing.

FIRST MONTH'S RENT must be PAID-IN-FULL at the apartment check-in or before. No keys will be given for an apartment until the security deposit and first month's rent are paid in full.

EQUAL HOUSING OPPORTUNITY

Oakview Garden Apartments will not discriminate on basis of race, color, religion, sex, handicap, honorable discharge, physical appearance, student status or political beliefs.

By signing below, I acknowledge that I have read and understand all of the above:

NAME: _____

DATE: _____