

Tillmann Rentals Rental Application

1055 Spring Street, Grafton WI 53024

Phone: (262) 377-8742 Fax: (262) 377-1030 Email: tillmannrentals@wi.rr.com

Address of Apt. applying for: _____
Monthly Rent Amount Listed: _____ Occupancy Date Wanted: _____

Applicant #1

Name _____ Date of Birth _____

Phone # _____ Drivers License# _____

Social Security Number: _____

Complete Address (no PO Boxes) _____

List any additional occupants under age 18 _____

Have you ever been convicted of a felony: (circle one) Yes or NO

If so, what and when: _____

Are you a smoker? Yes or No Are any other occupants smokers? Yes or No

How did you hear of us? Internet Word of mouth Magazine Oz. Guide/Post News Graphic

Milw. Journal Oz. Press Sign on Property Other(Please list) _____

List all other names you may have used including maiden names (if applicable): _____

Present Landlord _____ Phone # _____

Length of occupancy _____ **If less than 5 years, list all landlords,**

telephone numbers and addresses resided at for the past 5 yrs. _____

Current Employer _____

H.R. Department Phone # _____ Position _____

Length of employment _____ Gross monthly salary/hourly rate _____

List other sources of income, phone numbers & amounts _____

If employed less than 2 years with present employer, list all prior employers for the last 2 years and H.R. Dept. phone numbers _____

Financial Information:

Name & phone number of bank for checking account _____

Name & phone number of bank for savings account _____

List all charge cards you have including monthly payment amounts: _____

List any on-going payments (car payments, loans, child support, alimony, other) now or expected in the next year; include name of debt and monthly payment amount _____

Vehicle Information:

Year: _____ Make: _____ License: _____

Year: _____ Make: _____ License: _____

References:

Name _____ Phone # _____

Name _____ Phone # _____

Applicant #2

Name _____ Date of Birth _____
Phone # _____ Drivers License# _____
Social Security Number: _____
Complete Address (no PO Boxes) _____

List any additional occupants under age 18 _____

Have you ever been convicted of a felony: (circle one) Yes or NO

If so, what and when: _____

Are you a smoker? Yes or No Are any other occupants smokers? Yes or No

How did you hear of us? Internet Word of mouth Magazine Oz. Guide/Post News Graphic
Milw. Journal Oz. Press Other(Please list) _____

List all other names you may have used in past including maiden names (if applicable): _____

Present Landlord _____ Phone # _____

Length of occupancy _____ **If less than 5 years, list all landlords,
telephone numbers and addresses resided at for the past 5 yrs.** _____

Current Employer _____

H.R. Department Phone # _____ Position _____

Length of employment _____ Gross monthly salary _____

List other sources of income, phone numbers & amounts _____

**If employed less than 2 years with present employer, list all prior employers for the last 2
years and H.R. Dept. phone numbers** _____

Financial Information:

Name & phone number of bank for checking account _____

Name & phone number of bank for savings account _____

List all charge cards you have including monthly payment amounts: _____

List any on-going payments (car payments, loans, child support, alimony, other) now or expected
in the next year; include name of debt and monthly payment amount _____

Vehicle Information (if different from 1st applicants):

Year: _____ Make: _____ License: _____

Year: _____ Make: _____ License: _____

References:

Name _____ Phone # _____

Name _____ Phone # _____

I or we authorize Tillmann Rentals to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information. I hereby expressly release Tillmann Rentals and any procurer or furnisher of information, from any liability whatsoever in the use, procurement or furnishing of such information and understand that my application information may be provided to various local, state, and/or federal government agencies, including without limitation various law enforcement agencies. I or we authorize all financial institutions to release account information. I understand that any misrepresentations made on the application are reason for the application to be rejected.

Applicant #1 _____ Date _____

Applicant #2 _____ Date _____

We are an equal housing opportunity provider. We do not discriminate on the basis of race, color, religion, sex, familial status, national origin, ancestry, marital status, sexual orientation, lawful source of income, age or handicap.

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://www.offender.doc.state.wi.us/public> or by phone at 877-234-0085.

***** Upon acceptance of this application, it is our office's policy to have a lease signed and security deposit here in the office within one week.**