

All questions on this Rental Application must be answered completely or the Application can not be processed.

Community Name \_\_\_\_\_ Apt #/Type: \_\_\_\_\_ Date \_\_\_\_\_

Size of Apartment Needed \_\_\_\_\_ Approximate Move-in Date \_\_\_\_\_ For How Many Months \_\_\_\_\_

Number of Occupants \_\_\_\_\_ How did you hear about us \_\_\_\_\_

Did one of our current residents refer you? Yes  No

If yes, who (Name) \_\_\_\_\_ (Phone) \_\_\_\_\_

**Name** (First, Middle, Last) \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Telephone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Driver's License / State ID No. \_\_\_\_\_ State Issued \_\_\_\_\_

**Present Address** \_\_\_\_\_ Dates of Occupancy \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Current Rent \_\_\_\_\_

Landlord \_\_\_\_\_ Contact Person \_\_\_\_\_ Landlord Phone # \_\_\_\_\_

**Previous Address** \_\_\_\_\_ Dates of Occupancy \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Previous Rent \_\_\_\_\_

Previous Landlord \_\_\_\_\_ Contact Person \_\_\_\_\_ Landlord Phone # \_\_\_\_\_

**Bank Name and Account #** Checking \_\_\_\_\_

Savings \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Length of Employment \_\_\_\_\_ Gross Monthly Wages \_\_\_\_\_ Other Income: \_\_\_\_\_

Please List Any Occupants that are under the age of 18 years old: (Name/Relationship)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Do you have a pet? Yes No

If yes, type of pet \_\_\_\_\_

In case of emergency notify \_\_\_\_\_ Relationship \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

In case of emergency notify \_\_\_\_\_ Relationship \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_



1. Have you ever been evicted from a rental situation for Non-payment of rent? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ If  
yes, explain in detail: \_\_\_\_\_
2. Has a judgment ever been obtained against you? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ If  
yes, Creditor \_\_\_\_\_ Amount \_\_\_\_\_  
Reason \_\_\_\_\_
3. Have you ever had an account referred to a collection agency? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, explain in detail: \_\_\_\_\_
4. Have you ever been convicted of a misdemeanor or felony? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, explain in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Have you ever had an Application For Rental rejected by a Wilson White Company managed property? \_\_\_\_\_  
Yes \_\_\_\_\_ No If yes, for what reason? \_\_\_\_\_
6. Have you ever rented an apartment managed by Wilson White Company? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, Address \_\_\_\_\_ Dates \_\_\_\_\_

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### UTILITY SET UP RELEASE

I \_\_\_\_\_ do here by give Wilson White Company, Inc. my  
(Print Name)  
permission to use my personal information to attempt set up of the electric and/or gas utilities in my name, for the  
address of

\_\_\_\_\_  
(Apartment Address)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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The deposit you have made in the amount of \$ \_\_\_\_\_ for \_\_\_\_\_  
is an earnest money deposit that will hold this apartment/house during the processing of this Application and will not be refunded after the Application has been  
approved. If this Application is not approved by us, the full amount of your earnest money deposit will be returned to you. Upon execution of the Lease your ear-  
nest money deposit will be applied toward our required Damage and Security Deposit.

- After you have been notified of approval of your Application a Lease Agreement **must be signed within ten (10) business days** or our  
offer to Lease may be withdrawn and your earnest money deposit shall be retained by us as liquidated damages.
- By signing this Application For Rental the applicant(s) acknowledge that they have been advised of our Homebuyer/Transfer/Buyout  
Addendum and have received a copy of the terms of the Addendums. (These options are only available on 12 month leases or longer)
- Pets are not allowed unless agreed to in writing by both parties and appropriate fees are paid.
- Possession of the premises is not guaranteed until Wilson White Company deems the apartment is ready for occupancy. Wilson White  
Company shall not be liable for any delay in possession of the premises due to causes beyond its direct control.

The applicant hereby certifies that he/she is of legal age and that all information contained in this Rental Application is true and complete. The applicant  
recognizes that any falsification, misrepresentation or omission will result in the rejection of this Application. The applicant authorizes Wilson White Company to  
investigate all statements contained in this Application including but not limited to employment and income verification, landlord references, to obtain a credit  
report, criminal history, and to periodically update this information throughout the Lease term or any extension thereof as allowed by law.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

**EMPLOYMENT VERIFICATION**

Length of employment: \_\_\_\_\_ Position: \_\_\_\_\_

Income: \_\_\_\_\_ Income Requirement: \_\_\_\_\_

NAME OF INDIVIDUAL THAT PROVIDED INFO: \_\_\_\_\_ DATE: \_\_\_\_\_

NOTE: If income requirement is met through other than gross wages, explain and attach documentation.

**CREDIT CHECKED** \_\_\_\_\_ **SEXUAL OFFENDERS REGISTRY CHECKED** \_\_\_\_\_ **CRIMINAL BACKGROUND CHECKED** \_\_\_\_\_

**LANDLORD REFERENCE**

Most Recent Landlord Reference

Previous Landlord Reference

- |   |                          |                          |
|---|--------------------------|--------------------------|
| 1) Verify the address given on the Application For Rental                 | Yes: _____ No: _____     | Yes: _____ No: _____     |
| 2) Dates of Occupancy   | From: _____ To: _____    | From: _____ To: _____    |
| 3) Lease expiration date.   | Date: _____              | Date: _____              |
| 4) Was or is the individual on the Lease?                                 | Yes: _____ No: _____     | Yes: _____ No: _____     |
| 5) Number of people on the lease  | Number of People _____   | Number of People _____   |
| 6) Rental Rate  | Amount: _____            | Amount: _____            |
| 7) Is it required that rent be paid on a certain day of the month?        | Yes: _____ No: _____     | Yes: _____ No: _____     |
| a. Due Date   | Due: _____               | Due: _____               |
| b. If Late Payment, how many  |                          |                          |
| c. Any legal action taken for non payment?                                | # of late Payments _____ | # of late Payments _____ |
|   | Yes: _____ No: _____     | Yes: _____ No: _____     |
| 8) Was legal action required for anything other than non-payment of rent? | Yes: _____ No: _____     | Yes: _____ No: _____     |
|   | Yes: _____ No: _____     | Yes: _____ No: _____     |
| 9) Has/Did the individual give proper notice when vacating?               |                          |                          |

By\_\_By

10) Would you rent to this individual again? Y N If no, why—Current:

Previous: \_\_\_\_\_

11) Did you experience any problems with this individual that we should be aware of? Current:

Previous: \_\_\_\_\_

**ACCEPTED** \_\_\_\_\_ **REJECTED** \_\_\_\_\_ **BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

**REASON FOR REJECTION** \_\_\_\_\_

Address _____	Lease Dates: _____ to _____	Lead Based Paint Info _____
Rental Rate: _____	Security Deposit: _____	Total Lease Amount: _____
Application Fee: _____	Date Pd: _____	Check #: _____
Earnest Money Deposit: _____	Date Pd: _____	Check #: _____
1st Rental Period Amount: _____	Date Pd: _____	Check #: _____
Pet Fee: _____	Date Pd: _____	Check #: _____
Buyout Fee: _____	Date Pd: _____	Check #: _____
Carport: _____	Date Pd: _____	Check #: _____
<b>TOTAL AMOUNT DUE ON LEASE DATE:</b> _____		

Tenant Handbook Issued \_\_\_\_\_  
 Heating Cost Disclosure \_\_\_\_\_  
 Lease Signed Mgt. \_\_\_\_\_  
 Lease Delivered \_\_\_\_\_  
 Inst. To New Residents \_\_\_\_\_  
 Inventory Checklist issued \_\_\_\_\_  
 No. of Keys Issued: \_\_\_\_\_  
 Knob \_\_\_\_\_ Dead Bolt \_\_\_\_\_  
 Mail Box \_\_\_\_\_ Laundry \_\_\_\_\_  
 Front Door \_\_\_\_\_ Misc. \_\_\_\_\_

WILSON WHITE COMPANY, INC.  
AUTHORIZATION RELEASE FORM

To Whom It May Concern:

I, \_\_\_\_\_ hereby authorize you to release  
to Wilson White Company, Inc. for verification purposes, information concerning:

Employment history, dates, title, income, hours worked, etc.

Rental History

A copy of this authorization may be accepted as an original.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**WILSON WHITE COMPANY, INC.**  
**Lead-Based Paint Disclosure Form**

**Lead Warning Statement**

Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, LESSORS must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. LESSEES must also receive a federally approved pamphlet on lead poisoning prevention.

**Timing of Disclosure**

The parties agree that this Lead-Based Disclosure Form was executed before Lessee was obligated under any contract to lease.

**LESSOR's Disclosure**

**(a) Presence of lead-based paint and/or lead—based paint hazards (Check (i) or (ii) below):**

- \_\_\_\_\_ (i) Known lead-based paint and/or lead-based paint hazards are present in the housing (explain)  
  X   (ii) LESSOR has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

**(b) Records and reports available to the LESSOR (Check (i) or (ii) below):**

- \_\_\_\_\_ (i) LESSOR has provided the lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).  
  X   (ii) LESSOR has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

**LESSEE's Acknowledgement (initial at "c" & "d")**

(c) \_\_\_\_\_ Lessee has received copies of all information listed above.

\_\_\_\_\_

(d) \_\_\_\_\_ Lessee has received the pamphlet *Protect Your Family from Lead in Your Home*.

\_\_\_\_\_

**Certification of Accuracy**

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

**LESSOR:**

By: Wilson White Company, Inc., Agent

\_\_\_\_\_ Date: \_\_\_\_\_

**LESSEE:**

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_