



Dear Applicant:

Thank you for considering a Munz managed apartment community for your new home. We strive to make your housing decision as easy and comfortable as possible, so if you have any questions or comments, please ask. In an effort to assist you in your decision, this letter will explain our application review procedures and our acceptance criteria.

Upon receipt of your application, it will be reviewed to ensure that it is complete. **Incomplete applications will not be processed.** Applications with falsified information will be denied. All adult household members must complete a separate application. All members of the household (all persons who will occupy the apartment) must be listed on each application. A driver's license or other government issued identification card with a photo will be required from each adult at the time the application is submitted. Upon receipt of your completed application, we will perform the following steps:

- 1. Review Your Credit Report** - We will obtain your credit report through Equifax, Experian, or TransUnion and evaluate it against our credit criteria. We will cross reference your credit report with your application, checking for conflicting information. We will evaluate your credit history. With the exception of medical accounts, any delinquent accounts, collections or judgments totaling more than \$200.00 will result in automatic denial, unless a qualified cosigner is available for the applicant or proof of payment on delinquent accounts has been provided. Delinquent rental payments for past housing will result in automatic denial, unless proof of payment can be provided.
- 2. Obtain Your Housing Reference** - We will contact your present and previous housing providers with whom you have established a rental history. We will confirm that each adult in your household has maintained a good rental history over the most recent two years. If no rental history exists for the most recent two years, we will confirm prior rental history. If no rental history exists and there is no established credit history, a cosigner will be required. Housing references must be provided by a non-biased housing provider. A good housing reference would consist of, but not be limited to, timely rental payments, abiding by lease policies, not disturbing the neighbors and showing respect for property. Poor rental history will result in automatic denial.
- 3. Verify Your Income Source/Adequacy** - We will contact all listed sources of income to verify your household's annual income. Income is verified for all adult applicants of the apartment. Your gross annual household income must equal or exceed three times the amount of your annual rent for the apartment for which you are applying. If you are self-employed, we will ask for written verification and support of income claimed. If you are unemployed, or your income is insufficient, you must have liquid assets in the form of certificates of deposit, money market accounts, or other investment accounts (stocks, bonds, etc) greater than three times

the proposed annual rent for the apartment for which you are attempting to rent. This written verification may include requests for copies of previous tax return documents and other statements to support the amount of assets claimed. All income must be derived from a lawful source.

- 4. Public Record Search-** We will review any convictions that may be considered a threat to real property or other resident's enjoyment of the property. This could include, but is not limited to, eviction from housing, disorderly conduct, destruction of property, drug related offender and violence to persons. Time limits on exclusions do 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 39.03 (4)(d).

If you are unable to meet the minimum income-to-rent ratio, you must meet one of the following two requirements to receive further consideration. Until one of the two requirements is met, Landlord is not obligated to hold the apartment.

1. You provide a qualified co-signer. A qualified co-signer will be required to complete a rental application and pass all acceptance criteria as stated above. Your cosigner's gross income must equal or exceed the amount of their current annual rent/mortgage payment plus three times the proposed annual rent for the apartment for which you are attempting to rent. If your cosigner is self-employed, we will ask for written verification and support of income claimed. If your cosigner is unemployed, or has insufficient income, they must have liquid assets in the form of certificates of deposit, money market accounts, or other investment accounts (stocks, bonds, etc) greater than their current annual rent/mortgage payment plus three times the proposed annual rent for the apartment for which you are attempting to rent. This written verification may include request for copies of previous tax return documents and other statements to support the amount of assets claimed. All income must be derived from a lawful source.
2. You furnish documentation or statements of liquid assets in the form of CD's, money market accounts, or other investment accounts (stocks, bonds, etc) greater than three times the annual rent for the apartment you are applying for.

Our rental acceptance criteria have been designed to be as fair and reasonable as possible with a goal of obtaining information that is most relevant to your potential residency. We are required to comply with all Federal and State fair housing regulations. Therefore, we are unable to make any exceptions to these policies. If you have any questions or comments regarding these criteria, please feel free to contact our office.

Attachments:

Application for Residency
Rental History Verification

Income Source Verification
Occupancy Guidelines



APPLICATION FOR RESIDENCY

4781 Hayes Road, Madison, WI 53704

Return To: _____

Rental Consultant _____

Property Address _____ Apt. # _____
Rent _____ Other Fees _____ Security Deposit _____ Move-In Special _____
Lease Term _____ From _____ To _____ Referred By _____

It is the policy of the State of Wisconsin and Munz Corporation that all persons shall have an equal opportunity for housing as defined by federal, state and local open housing laws.

NAMES OF PERSONS TO OCCUPY APARTMENT

1. _____ SS# _____ DOB ___/___/___ Minor or Adult (Circle One)
2. _____ SS# _____ DOB ___/___/___ Minor or Adult (Circle One)
3. _____ SS# _____ DOB ___/___/___ Minor or Adult (Circle One)
4. _____ SS# _____ DOB ___/___/___ Minor or Adult (Circle One)

Date of birth is used for performing criminal background checks only

Do you own a pet? _____* If so, what kind? _____ Approximate weight of pet: _____

*Pets: Applications will not be approved without written veterinarian's certification of pet policy compliance.

HOUSING REFERENCE

Present Address _____ City _____ State _____ Zip _____
 Landlord _____ Landlord's Phone _____
 Length of Residency _____ Monthly Rent Payment _____
 Previous Address _____ City _____ State _____ Zip _____
 Landlord _____ Landlord's Phone _____
 Length of Residency _____ Monthly Rent Payment _____
 Have you ever been evicted from an apartment? Yes No (Circle One) If yes, why? _____

INCOME

Income Source _____ **Additional Income Source** _____
 Address _____ Address _____
 Position Held _____ Position Held _____
 Gross Monthly Income \$ _____ Gross Monthly Income \$ _____
 How Long? _____ How Long? _____
 Phone Number _____ Phone Number _____
 Immediate Supervisor _____ Immediate Supervision _____

VEHICLE/DRIVER I.D.

Driver's License # _____	State Issued _____	License Plate # _____
Car Make _____	Color _____	Year _____

EMERGENCY CONTACT (Other than person listed on application)

Name _____ Relationship _____ Home Phone Number _____
 Address _____ Work Phone Number _____

THIS APPLICATION IS NOT AN APARTMENT LEASE, CONTRACT OR RENTAL AGREEMENT. ALL APPLICATIONS ARE SUBJECT TO THE APPROVAL OF THE OWNER OR MANAGING AGENT. FALSE, INACCURATE OR INCOMPLETE INFORMATION MAY RESULT IN THE REJECTION OF THIS APPLICATION. UPON APPROVAL OF THIS APPLICATION, THIS APPLICATION WILL BECOME AN ADDENDUM TO THE APARTMENT LEASE. A GOVERNMENT ISSUED PHOTO IDENTIFICATION WILL BE REQUIRED PRIOR TO LEASE SIGNING IN ORDER TO VERIFY THE IDENTITY OF THE APPLICANT. WITHIN THIRTY (30) DAYS AFTER THE FIRST DAY OF THE LEASE TERM, APPLICANT/TENANT MAY REQUEST, IN WRITING, THAT THE LANDLORD PROVIDE THE APPLICANT/TENANT WITH A LIST OF PHYSICAL DAMAGES OR DEFECTS, IF ANY, CHARGED TO THE PREVIOUS TENANT'S SECURITY DEPOSIT. IF A MATERIAL MISREPRESENTATION OF THE APPLICATION IS DISCOVERED AFTER THE COMMENCEMENT OF THE LEASE TERM, LANDLORD RESERVES THE RIGHT TO COMMENCE ACTION TO TERMINATE TENANCY.

RECEIPT in the sum of \$ _____ is hereby acknowledged. This deposit is to be returned to the undersigned if the application is not accepted. If accepted, this sum will be applied to the security deposit. At the time the lease is signed, the Applicant agrees to pay the balance of the security deposit. The first month's rent, (+/- any applicable prorated amount) is due at the time of movein. If you do not enter into a lease after this application has been approved, actual costs and damages incurred will be deducted from the deposit. Deposits may also be withheld as compensation for lost rent if the Landlord makes reasonable efforts to mitigate the rental loss in accordance with Wis. Statutes 704-29 .

The undersigned Applicant agrees that the Landlord shall have up to twenty-one (21) calendar days from receipt of the earnest money deposit to approve or deny the rental application.

Disclosure of applicants social security number (SSN) and date of birth (DOB) is voluntary, and housing may not be denied solely on the applicant's decision to withhold their SSN.

Applicant hereby acknowledges receipt of a copy of this application, including disclosure information contained on page 2 of this application, Acceptance Criteria Letter, Apartment Lease, Policies and Procedures Addendum, NONSTANDARD RENTAL PROVISIONS and any other addenda that Applicant has expressed interest in which will require the Applicant's signature upon entering into a lease.

The Applicant consents to a routine inquiry of housing, income and credit references. This inquiry will provide applicable information concerning the Applicant's character, creditworthiness 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.

(See disclosures on the reverse side of this application.)

Do you wish to receive a written explanation of a denial of tenancy? _____ Yes _____ No

I certify that the answers given herein are true and complete to the best of my knowledge.

Signature _____ Date _____ Phone Number _____

Email _____

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. that a receipt for money collected has been given tenant (see reverse);
2. that copies of the proposed lease and rules and regulations of the landlord will be made available to tenant for inspection;
3. 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 or process can be made in person (see reverse);
4. that tenant has seven days, after the beginning of tenancy, to inspect the dwelling unit and notify landlord of any damages or defects existing prior to the beginning of tenancy;
5. of utility charges not included in the rent (see #2);
6. of the following uncorrected building and housing code violations, for which the landlord has received notice from code enforcement authorities and which affect the entire premises (in the City of Madison) or, only the dwelling unit and common areas (State of Wisconsin).
None _____;
_____;
7. that the premises contain the following conditions adversely affecting habitability: None _____;
_____;
8. that attached is an itemized description of any physical damages or defects for which deductions were made from the security deposit of the previous tenant. (OR) No determination has yet been made as to the amount, if any, of deductions and if such deductions are made, tenant will be provided with a written itemized description of said damages or defects at the time the previous tenant is notified; (Strike provision not applicable.)
9. that landlord promises to repair, clean, or improve the premises as follows by the completion dates noted: _____
_____ and,
10. that security deposits may be withheld only 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 the tenant, in writing, other than in form provision.

THE FOLLOWING DISCLOSURES APPLY TO THE CITY OF MADISON ONLY

TENANT/APPLICANT ACKNOWLEDGES HAVING BEEN ADVISED:

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 _____, however, occupancy is restricted to those persons named in the application and rental agreement;
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).



INCOME SOURCE VERIFICATION

Name of Applicant(s) _____

Address Being Applied For _____

Income Source _____

Telephone/Facsimile Number _____

Applicant consents to a routine inquiry of income verification. I hereby authorize the release of the requested information.

Applicant

Date

APPLICANT: DO NOT WRITE BELOW THIS LINE

In order for us to consider this applicant, all questions must be answered.

1. Position and Title: _____

2. Income amount? \$_____ (Circle one) Hourly / Weekly / Monthly / Yearly

3. If hourly rate, average number of hours worked weekly _____

4. Name and title of person verifying income?

Name: _____ Title/Phone #: _____

Office Use Only:

A. Monthly Income _____

B. Rent per month x 3 _____

C. Line A-Line B _____*

*If this amount is negative, applicant will be required to obtain a qualified cosigner.

Signature of Person Completing this form: _____

_____ Date _____

RENTAL HISTORY VERIFICATION

Name of Applicant(s) _____
Previous Address _____
Name of Housing Provider _____
Telephone/ Fax Number _____
Address Applying For _____

Applicant consents to a routine inquiry of references. I hereby authorize the release of the requested information.

 Applicant _____ Date

APPLICANT: DO NOT WRITE BELOW THIS LINE

In order for us to consider this applicant, all questions must be answered.

Are you related to or a friend of the applicant? (If so, do not count as a non-bias housing reference.)	YES	NO
Was/Is the above listed applicant on a lease with you? If yes, please specify the lease terms. From _____ To _____	YES	NO
Was proper notice given to vacate?	YES	NO
In the last lease period, was rent late more than two times? If yes, how often? _____	YES	NO
Were more than two NSF checks presented within the last 12 months?	YES	NO
Have you issued any five-day notices within the last 12 months? Please list dates and reasons for issuing. _____ _____	YES	NO
Did applicant allow persons other than those listed on the lease to live in apartment without housing provider's approval?	YES	NO
Was/Is there damage to the apartment or property by applicant, family members or guests?	YES	NO
Is/Was this the applicant evicted or under eviction action?	YES	NO
Would you renew/re-rent to this person?	YES	NO

 Housing Provider Signature _____ Date

Telephone reference verification conducted by: _____ Date _____ Name of person who provided telephone reference: _____

MUNZ APARTMENT COMMUNITIES
OCCUPANCY GUIDELINES

Effective February 12, 2007

EFFICIENCY

1 Person Limit

1 BEDROOM

2 Person Limit

2 BEDROOM

4 Person Limit
(no more than 2 adults)

3 BEDROOM

6 Person Limit
(no more than 3 adults)

Adult = 18 years and older