

Special Offered

MOVE IN ADDRESS _____
DATE _____ TIME _____

Co-Signer Needed _____ Date _____ Initial _____
APPROVED - Yes _____ No _____
By _____ Date _____
Date Called _____ Initial _____
Labels _____

(**ALL SPECIALS SUBJECT TO CHANGE**)
Appt. Date _____ Appt. Time _____
App Initial _____ Agents Initial _____
RENTAL AGENT _____

KOS MANAGEMENT APPLICATION FOR RESIDENCY

****How did you hear about us? _____ If Referral, Name _____ Address _____ ****

PROPERTY APPLIED FOR :

1ST Choice Address _____ 2nd Choice Address _____
Rent: \$ _____ Lease Term: _____ Rent: \$ _____ Lease Term: _____
Security _____ Key _____ GDO _____ Security _____ Key _____ GDO _____
Utilities paid by owner _____ Utilities paid by owner _____
Utilities paid by Resident _____ /Phone & Cable Utilities paid by Resident _____ /Phone & Cable

Rent Washer/Dryer: N/A _____ Yes _____ No _____ \$ _____
W/D in the Apartment: N/A _____ Yes _____ No _____ MO # if yes and not renting _____
Pets: Yes _____ No _____ Type _____ # of Pets _____ (limit 2) Mo. Fee \$20/cat/month Sec. Dep. \$200/cat \$50/bird & hamster

APPLICANT:

Name _____ DOB _____ / _____ / _____ SSN _____ - _____ - _____ Driver's License # _____

CONTACT INFO: Cell Number: _____ Your Home Number: _____ E-Mail: _____
Work Number: _____ Can we contact you at work? Yes _____ No _____

OTHER PERSONS TO OCCUPY APARTMENT

(First Name, Middle Initial, Last Name)	Relationship	DOB
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

AUTOMOBILES

1. Make of Vehicle _____ Year _____ Plate No. _____ Color _____

IN CASE OF AN EMERGENCY PLEASE NOTIFY (not roommate): Name _____ Relationship _____
Phone No. _____ Address _____
City _____ State _____ Zip Code _____

HOUSING REFERENCES - TWO (2) YEARS MINIMUM

1. Present Address: _____ City: _____ State: _____ Zip: _____
How long? _____ Landlord Name _____ LL Ph # _____
Reason for leaving? _____ Rent Paid _____
2. Previous Address: _____ City: _____ State: _____ Zip: _____
How long? _____ Landlord Name _____ LL Ph # _____
Reason for leaving? _____ Rent Paid _____
Have you ever been evicted or broken a lease? _____ If so, why? _____

1270 Main Street, Green Bay, WI 54302
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www.kosmanagement.com

We subscribe to all federal, state and local fair housing laws.



EMPLOYMENT – TWO (2) YEARS REQUIRED

****A copy of current paystub or last year’s tax return is required.**

1. Present Employer/s _____ Phone No. _____
 Length of Employment _____ Position _____ Supervisor _____
 Hourly wage _____ # of Hrs per week _____ Annual Salary _____
 2. Previous Employer _____ Phone No. _____
 Length of Employment _____ Position _____ Supervisor _____
 Hourly _____ # of Hrs per week _____ Annual Salary _____
- If more than 2 employers in the last two years, please write them on a different piece of paper.

OTHER LEGAL SOURCES OF INCOME

SOURCE: _____ AMT _____ (proof of income is required)
 SOURCE: _____ AMT _____ (proof of income is required)

STUDENT

Are you a student? _____ If yes, part-time? _____ full-time? _____
 Do you have student loans or grant money to help with rent? _____ Amount? _____ (proof of money is required)

CREDIT REFERENCES

Have you ever declared Bankruptcy? _____ If So What Year _____

Applicant Acknowledges:

- _____ A receipt for the earnest money will be given to the applicant upon completion of this application.
 Initial _____ See blue requirement sheet on how monies should be paid.
- _____ Copies of the proposed lease, rules, non-standard lease provisions, or lease addendum of the landlord have
 Initial _____ been made available to applicant for inspection.
- _____ That applicant has been advised of name and address of person authorized to receive rent, manage and
 Initial _____ maintain premises who can be readily contacted, and an owner or agent and address within the state who
 is authorized to receive rent, make receipt for notice and demands, and at which process can be made in person.
- _____ That applicant has been advised that residents have seven to ten days after beginning of tenancy to inspect the
 Initial _____ dwelling unit and notify landlord of any damages or defects existing prior to beginning of tenancy.
- _____ That applicant has been advised of utility charges not included in the rent;
 Initial _____
- _____ Being advised of the following uncorrected building and housing code violations for which the landlord has
 Initial _____ received notice from code enforcement authorities and which affect the dwelling unit and common areas:

- _____ Being advised that the premises contain the following conditions adversely affecting habitability:
 Initial _____ _____
- _____ Applicant is advised that after beginning of tenancy resident has a right to request in writing an itemized list
 Initial _____ of physical damages or defaults for which deductions were made from Security Deposit of previous resident.
- _____ Applicant has been advised that security deposits may be withheld for tenant damage, waste or neglect of
 Initial _____ premises or nonpayment of rent, utility service or mobile home parking fees for which landlord becomes liable
 and other reasons specifically and separately negotiated and agreed to in writing by tenant other than in form
 provision as follows: _____
- _____ False or incomplete information can result in denial of application.
 Initial _____

Signature Page

Will there be a washer/dryer in the apartment? _____. If yes, Renters Insurance is required. Certificate of Insurance is to be given at Move-in. Renters Insurance is always recommended.

I recognize that this application is subject to acceptance or rejection.

I hereby state that the information set forth on this application is true and complete, and authorize verification of the information and references given. I further guarantee that only _____ person(s) will reside in the apartment.

The applicant has paid an Escrow Deposit of \$_____ (check / money order) for apartment_____. The expected occupancy date is _____. Applicant is responsible for rent from that date. _____/INITIAL

*(This Deposit is refundable upon cancellation of this agreement by either the applicant or the Landlord, within THREE (3) BUSINESS DAYS of today's date _____ / DATE. It is our goal to review all applications within 3 business days, however, in some cases, due to the timing of landlord reference checks, it may take longer. Application review will not exceed 21 days. Upon approval of this application, the Escrow Deposit will be credited as part of the 1st Months rent due. If this application is accepted and the applicant does not sign the Lease, by the agreed occupancy date, the Escrow Deposit will be forfeited as liquidated damages for rent and/or rental costs.

APPLICANT

***An additional _____ DAY/S processing time has been agreed to by Applicant and Landlord. (To be used ONLY if extension is required.)**

KOS MANAGEMENT

DATE

APPLICANT

DATE

Disclosures and Requirements:

According to State of Wisconsin Statutes, the following disclosures are required prior to entering into a rental agreement and prior to accepting earnest money.

_____ Applicant understands a criminal background check is part of the application process.

Initial

_____ Applicant authorizes the use of Credit information, obtained from Trans Union, to be used for approval or denial of Application.

Initial

_____ Applicant has paid a Non-refundable fee of \$_____ per report, for this purpose. See blue requirement sheet on how monies should be paid.

Initial

_____ Applicant authorizes release of any employment information (which includes wage, salary, length of employment, hours work per week)/rental information needed to complete application process.

Initial

_____ If application is approved Applicant gives KOS Management permission to give any necessary information to the utility companies to set service in applicants name; this does include, but is not limited to, SS# and date of birth.

Initial

Applicant Name _____ (PLEASE PRINT)

Applicant Signature _____ Date _____

Received by: _____ Date _____ Time _____ Copy of application to resident: In person _____ Mailed _____

TRANSFER APP

APT CK'D BY _____

MOVE-OUT NOTICE REC'D & COPY TO RESIDENT

****Faxed Copy of Application will be accepted with copies of separate checks for "Escrow Fee" and "Credit Check". Original application is to be mailed promptly with checks.**