

Windy City Management LLC
510 East 17th • Suite G • Hutchinson • KS 6501
Phone 620-663-4471 • Fax 620-663-4474

Property Address _____ Property Number _____
 Monthly Rent \$ _____ Security Deposit \$ _____ (same as rent)
 Lease Term One (1) year Move in Date _____
 How were you referred to us Newspaper Ad Agency Friend Word of Mouth
 Name _____ Age _____ S.S. # _____
 Home Phone _____ Cell _____ Date of Birth _____
 Present Address _____ How long _____ Present Rent \$ _____
 Present Landlord _____ Phone _____
 Present Employer _____ How Long _____ Phone _____
 Address _____ Salary \$ _____ Position _____
 Spouse/Co-Tenant _____ Age _____ S.S # _____
 Home Phone _____ Cell _____ Date of Birth _____
 Present Address _____ How Long _____ Present Rent \$ _____
 Present Landlord _____ Phone _____
 Present Employer _____ How Long _____ Phone _____
 Address _____ Salary \$ _____ Position _____
 Other income _____ Source _____
 # Of Children _____ Pet(s)/Breed/Name _____
 Emergency Contact: _____ Phone Number: _____
 Relationship to you _____ Address _____
 City _____ State _____ Zip Code _____

Do you have any prior convictions we need to know about? _____

Please Read Before Signing

I/We _____ Agree that:

- 1) You have the right to verify all information given on this application and to contact any of my past landlords or references prior to rental, and to release information about me as a tenant to other residential landlords or landlord associations.
- 2) Should I vacate leaving property damaged or not clean said damage or cleaning costs will be deducted from my deposit and additional damages over deposit will be paid by me.
- 3) Deposit refunded only if application is rejected by landlord. Landlord will retain deposit for liquidated damages in the event of cancellation by applicant.

In the event the application is approved and the applicant fails or refuses to execute or enter into the contemplated lease, owner shall retain said earnest deposit as liquidated damages to cover the costs of taking and processing this application, as well as the loss of rent occasioned by the owner reserving said apartment for the applicant. Both parties acknowledge that these damages are difficult to calculate, but may include commissions for re-leasing and overhead attributable to advertising, bookkeeping and other similar costs. If the contemplated lease is executed by the applicant and the owner, the earnest deposit shall be applied toward the security deposit as defined in said lease. In the event this application is disapproved by the owner, for any reason for which the owner is responsible, the lease agreement is not consummated, this deposit shall be returned to the applicant.

SIGNED: _____ **Date:** _____

SIGNED: _____ **Date:** _____

Application Fee Received: \$ _____ Date: _____

Deposit Received \$ _____ Date: _____

APPROVED: Windy City Management LLC

By: _____ **Date:** _____

Application Declarations and Authorization

(To accompany the application)

Accurate Information. You declare that all of your statements on the accompanying application and any supplemental information are and correct. If you fail to fully and completely answer any question or give false information, we may reject the application and retain all application fees as liquidated damages for our time and expense. Giving false information is a serious criminal offense.

Authorization. You authorize us to verify all information relating to this application through any means, including but not limited to Straight Arrow Screening and any other consumer reporting agencies, public record resources, and other rental housing owners. You further authorize us to furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your lease obligations, including both favorable and unfavorable information about your compliance with any lease, rules, or financial obligations.

In the event that anything contained herein is in conflict with any additional application document, this document will be controlling.

(Each applicant must be named, sign, and date/time this “Declarations and Authorization”)

_____ Applicant Name	_____ Applicant Signature	_____/_____ Date/Time
_____ Applicant Name	_____ Applicant Signature	_____/_____ Date/Time
_____ Applicant Name	_____ Applicant Signature	_____/_____ Date/Time
_____ Applicant Name	_____ Applicant Signature	_____/_____ Date/Time