



**520 East 30th Ave, Suite B
Hutchinson Kansas 67502
620-663-4471**

We require 6 months steady employment with the same employer.
Tenants are required to purchase and maintain renter's insurance.
*Confirmation of utility service connections and renter's insurance
MUST be turned in at lease signing.*

**Please return with \$35.00 cash or money order (non-refundable application fee)
If application is approved, the deposit will hold property for 15 days.**

Please Print Legibly

Property Address _____ Property Number _____ (Office use only)

Rent \$ _____ Security Deposit \$ _____ (*\$150.00 Non-Refundable*)

Lease Term: 1 year Move in Date _____

Name _____ Driver's License# and State _____

Birth Date ____/____/____ Age ____ Social Security# _____

Home Phone (____) _____ Cell (____) _____

Email Address _____

Present Address _____ City _____ State _____ Zip _____

How long _____ Present Rent \$ _____

Present Landlord _____ Phone _____

Present Employer _____ How Long _____ Position _____

Employer's Address _____ City _____ State _____ Zip _____

Phone (____) _____

Monthly Salary \$ _____ Other Income \$ _____ Source _____

Spouse/Co-tenant _____ Driver's License# and State _____

Birth Date ___/___/___ Age ___ Social Security# _____

Home Phone (____) _____ Cell (____) _____

Email address _____

Present Address _____ City _____ State _____ Zip _____

How long _____ Present Rent \$ _____

Present Landlord _____ Phone _____

Present Employer _____ How Long _____ Position _____

Employer's Address _____ City _____ State _____ Zip _____

Phone (____) _____

Monthly Salary \$ _____ Other Income \$ _____ Source _____

Of Children () Children's names: _____

Pets/Breed/Name _____ Do you have a vacuum? _____

Note: Pet(s) will increase the rent as follows: 1 pet = \$25/month 2 pets = \$35/month

Emergency Contact: _____ Phone Number: (____) _____

Relationship to you _____ Address _____

City _____ State _____ Zip code _____

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

Application Declarations and Authorization

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

Accurate Information: You declare that all of your statements on the accompanying application and any supplemental information are 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.

Applicant Name	Applicant Signature	Date/Time
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How were you referred to us *Newspaper Ad* *Agency* *Friend* *Word of Mouth*

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 the property damaged or not clean, damage or cleaning costs will be deducted from my deposit and additional damages over the deposit will be paid by me.

3) Deposit is 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 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. In the event this application is not approved by the owner, for any reason from which the owner is responsible, the lease agreement is not consummated and 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:** _____

