

3806 Oakwood Hills Pkwy  
Suite 1  
Eau Claire, WI 54701-7779

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## **APPLICATION FOR RESIDENCY**

This application is to be returned to the **PROPERTY MANAGER**.

**NOTE:**      **Your credit history and landlord references will be verified.**  
                    **No application will be approved without complete verifications.**

Please be sure to completely and neatly fill in ALL blanks.

Answer all "Yes or No" questions.

Be sure to include the name, date of birth and social security number of all the people who will be living with you. All co-applicants over the age of 18 must complete their own application, unless husband and wife.

Attached to your application you will find a Policy Statement for acceptance to this apartment complex.

**WE SUBSCRIBE TO ALL FEDERAL, STATE AND LOCAL FAIR-HOUSING LAWS.**

**RESIDENTS, OTHERS IN THEIR HOUSEHOLDS, AND PEOPLE UNDER THEIR CONTROL  
MUST NOT TAKE PART IN ILLEGAL DRUG ACTIVITY ON OR NEAR THEIR RENTAL AREA  
OR THEY WILL FACE EVICTION.**



## POLICY STATEMENT

*All applicants will be accepted or rejected for residency. No person(s) will be denied occupancy based on membership in any protected class, according to local, state and federal fair housing laws.*

Augusta Housing Management Company, LLC maintains the following policies.

1. Applicants whose rent would exceed 40% of their monthly income may be required to obtain a co-signer. A co-signer, if required, must guarantee rental payments by signature, in person or in the presence of a notary, on the lease. Co-signer shall qualify by virtue of credit reference and record of timely payment of debts. In exceptional circumstances, such as no other debts, payments, credit record of prompt payment of all debts, half of monthly income for rent may be considered.
2. An applicant's credit report shall reflect a habit of prompt payment of debts and no unsatisfied judgments. A co-signer guarantor may be requested in the absence of required credit report.
3. A positive past housing reference will be required. If applicant has no prior rental history, a co-signer may be required. Past housing reference shall include:
  - a. Record of timely payment of rent;
  - b. Record of abiding by management rules;
  - c. Record of not disturbing other residents; and
  - d. Record of respect of property.
4. An applicant's criminal record could potentially affect the approval of the applications based on a record of conviction of a controlled substance in last five years.
5. All applicants will be screened through the National Sex Offender Registry. Any registrant will be denied.
6. All information on the application form must be completed; any falsification of information on the application shall be grounds for rejection.
7. No more than two (2) persons per bedroom shall occupy a unit. This policy shall be applied to ALL qualified applicants, regardless of their membership in any protected class.
8. Delinquent tenants will not be tolerated. Failure to pay rent and/or excessive damage to units or common areas is grounds for eviction. Eviction policies for failure to pay rent will be strictly enforced.
9. Manufacture, distribution or use of a controlled substance on premises may be grounds for immediate eviction.
10. No pets are allowed, with the exception to service animals as required by the Americans with Disabilities Act or in a select designated pet unit with a signed pet policy



### RESIDENTIAL RENTAL APPLICATION

- Please Fill Out This Application Completely and Neatly.
- EVERY Question Must Be Answered.

Property Site Location/City: \_\_\_\_\_ Apartment #: \_\_\_\_\_ Move In Date: \_\_\_/\_\_\_/\_\_\_

This application is NOT a Rental Agreement, Contract or Lease. All applications are subject to management approval. No applicant will be judged on the basis of race, color, religion, sex, handicap, familial status, national origin, sexual orientation, marital status, legal source of income, age, or ancestry.

FULL NAMES OF PERSONS TO OCCUPY APARTMENT	DATE OF BIRTH	SOCIAL SECURITY NUMBER
1. _____	____/____/____	____-____-____
2. _____	____/____/____	____-____-____
3. _____	____/____/____	____-____-____
4. _____	____/____/____	____-____-____
5. _____	____/____/____	____-____-____
6. _____	____/____/____	____-____-____

#### Address Information

Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Current Landlord: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ How long? \_\_\_\_\_ Rate: \$ \_\_\_\_\_/month

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ How long? \_\_\_\_\_ Rate: \$ \_\_\_\_\_/month

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ How long? \_\_\_\_\_ Rate: \$ \_\_\_\_\_/month

#### Income and Employment Information

Present Employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Net Wages: \$ \_\_\_\_\_ per \_\_\_\_\_ # of Hours \_\_\_\_\_ Years? \_\_\_\_\_

Secondary Income Source: \_\_\_\_\_ Address \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ How long will income be received? \_\_\_\_\_ Payment: \_\_\_\_\_/month

**Bank References and Financial Information**

Name of Bank: \_\_\_\_\_ Address \_\_\_\_\_

Checking Account: [ ] Balance: \$ \_\_\_\_\_ Savings Account: [ ] Balance: \$ \_\_\_\_\_

Ever Filed for Bankruptcy? ( ) Yes ( ) No

**Automobile Information**

Auto: \_\_\_\_\_ Plate # \_\_\_\_\_ Driver's License Number \_\_\_\_\_  
(make, model, year)

Auto: \_\_\_\_\_ Plate # \_\_\_\_\_ Driver's License Number \_\_\_\_\_  
(make, model, year)

**Emergency Contacts: Please List the Two Closest Relatives Living Nearest to You.**

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_  
Address City State Zip Code

Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_  
Address City State Zip Code

**Other Information:**

Do you have a pet? ( ) Yes ( ) No If yes, how many? \_\_\_\_\_ Cat/Dog/Bird/Other \_\_\_\_\_

Have you ever been evicted? ( ) Yes ( ) No

Have you ever willfully refused to pay rent when due? ( ) Yes ( ) No

Preferred Method of Contact: ( ) Phone ( ) Text ( ) Email

**References: Please list Personal References' Names, Addresses & Telephone Numbers.**

\_\_\_\_\_  
\_\_\_\_\_

WE ARE REQUIRED TO NOTIFY YOU THAT AS PART OF OUR PROCEDURE FOR PROCESSING YOUR APPLICATION, WE MAY INVESTIGATE YOUR CREDIT HISTORY, EMPLOYMENT HISTORY AND GENERAL BACKGROUND. BY SIGNING BELOW, YOU HEREBY GRANT PERMISSION FOR US TO DO SO. IN ADDITION, SIGNING BELOW CERTIFIES THAT ALL OF THE ABOVE INFORMATION IS TRUE, CORRECT AND COMPLETE TO THE BEST OF YOUR KNOWLEDGE.

\_\_\_\_\_  
(Signature of Applicant) (Date) (Signature of Applicant) (Date)

E-mail(s) \_\_\_\_\_

**PLEASE RETURN APPLICATION TO:**