

Manske Property Management, Inc.

Our office is in Whytecliffe Apartments 10050 W. Beloit Road Greenfield WI 53228 (414) 546-8090 Office (414) 543-5433 Fax

RENTAL APPLICATION

Visit us on the web: www.manskepropertymanagement.com

Email us: apts@manskepm.com



Management does not discriminate on the basis of any protected class under federal, state or local laws, rules, or ordinance.

Thank you for applying for residency with Manske Property Management. **Each adult 18 years of age or older must complete an application.** All requested information must be completed before this application will be processed. In order to insure prompt processing of your application, please print clearly and provide complete information including names, addresses and telephone numbers where requested. Management requires that the combined net household income meets or exceeds three times the rental payment amount. For example, if the rental payment is \$600.00 per month, the net household income must be \$1,800.00 per month or higher to qualify.

	To be completed l	oy Authorized Personne	l Only		
Shown by:	Date of Showi	ing:	ID Verified l	oy:	
Property Address (s):		Unit # (s):	Available Da	te:	
Advertising Source:		Rec	uired Move Date:	· · ·	
	Security Depos				
	Descr				
	s offered:	•			
improvements of Special	s officied.				
APPLICANT INFORMATION	ON:				
Date of Application:		Total # of Occupants:	Total #	of Vehicles:	
Name of Applicant:					
	(First)	(Middle)		(Last)	
Have you ever been knowr	n by another name? YES NO	If yes, list names:			
Oriver's License. #:		Issuing State:_		_(Proof of identificat	ion is required)
Date of Birth:	Social Security #:		Email:		
Home Phone:	Work Phone:				
	(Please check your p	referred method of contact abo	ove)		
RESIDENCE HISTORY:					
Present Address:					
andland Names	(street)		(city)	(state)	(zip)
				1-	
, ,	Yes No Why are you mo	<u> </u>			
	(street)	(apt #)	(city)	(state)	(zip)
andlord Address:					
Current Rental Payment: \$	Yes No Why did you mo	_Dates of Occupancy:		to	
Were you evicted?	Yes No Why did you mo	ve?			
EMPLOYMENT HISTORY	<u>:</u>				
Present Employer:		Name	e of Supervisor:		
Employer Address:			•		
Telephone #:		Length of Service:		_to	
		Net Income (m			
			· ·		
			onthly): Ś		

MISCELLANEOUS:					
Have you ever convicted of a felo	ny or been arrest	ed for a crime other than	n a traffic offense?	□YES □NO	
Have you ever filed bankruptcy?				∐YES ∐NO	
Have you ever been served an ev					
Have you ever willfully or intention				∐YES ∐NO	
Do you know of anything which n			rent?	∐YES ∐NO	
Have you ever broken or failed to	_			L_YES L_NO	
If you answered yes to any of the	questions above	please explain:			
Do any of your household member	ers smoke?			□YES □NO	
Do any of your household member				TYES TNO	
PET INFORMATION:					
All household pets must be listed	helow even cage	ed animals Pet Agreeme	nt Must Be Signed	Total # of Household Pets:	
ANIMAL TYPE BREED	WEIGH		NAME	DESCRIPTION/COLOR	
Each property may have its own restriction	ons in type brood w	oight and number of note Nor	o of our proporties allo	w more than two pets total per household.	
				tymanagement.com. If in doubt, please ask for	
clarification or contact our office before a	·	, . ,		.,	
The following dog breeds, mixed or pure	are not allowed at a	ny of our properties:		<u></u>	
Pit Bull Terrier Doberman	Rottweiler	German Shepard	Husky		
Akita Chow	Malamute	Staffordshire Terrier	Bull Terrier	<u>—</u>	
VEHICLE INFORMATION:					
MAKE MODEL		YEAR	COLOR	PLATE NUMBER	
-					
All vehicles must be registered, licensed a	nd in operable condit	tion! We do not allow trailers, o	ampers, RV's, jet-ski's, n	nonster trucks or other oversized trucks!	
MINOR HOUSEHOLD MEMBERS:	Please list all individu	uals under the age of 18 years b	elow.		
Name:	Date o	of Birth:	Social	Sec. #:	
Name:				Sec. #:	
Name:			Social Sec. #:		
Name:			Social Sec. #:		
				I a FIVE-DAY NOTICE TO VACATE may be served	
to the tenant (s).	<i>o. o o</i>			•	
EMERGENCY CONTACT (This person	n must be local and no	ot a household member)			
Full Name:			Telep	hone Number:	
Address:				onship:	
(Street)	(Apt#)	(City/state/zip)		onsnip	
Applicant agrees to pay a non-refund		Terms and Conditions of Ap	-	checks are not accepted as payment of	
				plicant pays the \$20.00 Credit Check Fee,	
, ,,	• •			• •	
	/ or the consumer t	redit report obtained by ma	anagement regardiess	of whether the applicant's application is	
accepted or denied.					
Applicant understands that a security	deposit is required	d and must be paid in full be	efore occupancy will b	e given. If the full security deposit is not	
paid upon the execution of the lease,	the applicant will	not be provided with occup	ancy of the rental unit	and the acceptance of the applicant's	
application will be rescinded. Tenant	further acknowled	ges and agrees that the sec	urity deposit cannot b	e used to pay the first or last month's rent	
Applicant agrees that there are no ve	erbal agreements.	All agreements must be in	writing and must be si	gned by both management and applicant.	
				plete and does not contain any false or	
misleading information. Applicant un	derstands and agre	ees that if any information p	provided on this applic	ation is found to be false or misleading	
during the application review process	s, this application s	hall be denied.			
			19. 1 . 1		
		_	credit check, rental his	tory verification, employment verification	
and criminal background check with	organizations that i	provide such services.			
Applicants Cignature			.	nua Data.	
Applicants Signature:			Signat	ure Date:	

TENANT DISCLOSURE AND RELEASE

the nam	authorize Manske Prope Management to obtain both past and current information concerning the names and dates of previous employers, public records, credit data bankruptcy proceedings, eviction or landlord judgments, criminal background checks/records and income verification.				
CONTAC	CTED BY M		RTY MANAGE	ARTY OR AGENCY MENT TO FURNISH THE	
federal, approve serve as	state and ed as a tend of as a tend on goin	other agencies ant, this autho	s that provide sorization shall room for you to pr	umer report(s) from such services. If emain on file and shall ocure consumer reports	
Address		Unit #			
City	State	Zip			
	Name		DOB	 Date	
Signatui	re		 DOB	 Date	

4801 Forest Run Road Madison, Wisconsin 53704

BROKER DISCLOSURE TO CUSTOMERS

Page 1 of 2

Prior to negotiating on your behalf the Broker must provide you the following disclosure statement:

2 BROKER DISCLOSURE TO CUSTOMERS

- 3 You are a customer of the broker. The broker is either an agent of another party in the transaction or a subagent of another broker
- 4 who is the agent of another party in the transaction. The broker, or a salesperson acting on behalf of the broker, may provide
- 5 brokerage services to you. Whenever the broker is providing brokerage services to you, the broker owes you, the customer, the 6 following duties:
- 7 ■ The duty to provide brokerage services to you fairly and honestly.
- 8 The duty to exercise reasonable skill and care in providing brokerage services to you.
- 9 The duty to provide you with accurate information about market conditions within a reasonable time if you request it, unless 10 disclosure of the information is prohibited by law.
- 11 The duty to disclose to you in writing certain material adverse facts about a property, unless disclosure of the information is 12 prohibited by law (See Lines 55-63).
- 13 The duty to protect your confidentiality. Unless the law requires it, the broker will not disclose your confidential information or the 14 confidential information of other parties (See Lines 22-39).
- 15 The duty to safeguard trust funds and other property the broker holds.
- 16 The duty, when negotiating, to present contract proposals in an objective and unbiased manner and disclose the advantages and 17 disadvantages of the proposals.
- 18 Please review this information carefully. A broker or salesperson can answer your questions about brokerage services, but if you
- 19 need legal advice, tax advice, or a professional home inspection, contact an attorney, tax advisor, or home inspector.
- 20 This disclosure is required by section 452.135 of the Wisconsin statutes and is for information only. It is a plain-language summary of a broker's duties to a customer under section 452.133 (1) of the Wisconsin statutes. 21

22 CONFIDENTIALITY NOTICE TO CUSTOMERS

- 23 BROKER WILL KEEP CONFIDENTIAL ANY INFORMATION GIVEN TO BROKER IN CONFIDENCE, OR ANY INFORMATION
- 24 OBTAINED BY BROKER THAT HE OR SHE KNOWS A REASONABLE PERSON WOULD WANT TO BE KEPT CONFIDENTIAL,
- 25 UNLESS THE INFORMATION MUST BE DISCLOSED BY LAW OR YOU AUTHORIZE THE BROKER TO DISCLOSE PARTICULAR
- 26 INFORMATION. A BROKER SHALL CONTINUE TO KEEP THE INFORMATION CONFIDENTIAL AFTER BROKER IS NO LONGER 27 PROVIDING BROKERAGE SERVICES TO YOU.
- 28 THE FOLLOWING INFORMATION IS REQUIRED TO BE DISCLOSED BY LAW:
- 29 1. MATERIAL ADVERSE FACTS, AS DEFINED IN SECTION 452.01 (5g) OF THE WISCONSIN STATUTES (SEE LINES 55-63).
- 30 2. ANY FACTS KNOWN BY THE BROKER THAT CONTRADICT ANY INFORMATION INCLUDED IN A WRITTEN INSPECTION 31 REPORT ON THE PROPERTY OR REAL ESTATE THAT IS THE SUBJECT OF THE TRANSACTION.
- 32 TO ENSURE THAT THE BROKER IS AWARE OF WHAT SPECIFIC INFORMATION YOU CONSIDER CONFIDENTIAL, YOU MAY LIST
- 33 THAT INFORMATION BELOW (SEE LINES 35-36). AT A LATER TIME, YOU MAY ALSO PROVIDE THE BROKER WITH OTHER 34 INFORMATION YOU CONSIDER TO BE CONFIDENTIAL.
- 35 **CONFIDENTIAL INFORMATION:**

36	
37	NON-CONFIDENTIAL INFORMATION (The following information may be disclosed by Broker):
38	
20	INCERT INFORMATION VOLUMETHORIZE THE PROVER TO DISCLOSE CHOIL AS FINANCIAL CHARLESTON INFORMATION

(INSERT INFORMATION YOU AUTHORIZE THE BROKER TO DISCLOSE SUCH AS FINANCIAL QUALIFICATION INFORMATION.) 39 CONSENT TO TELEPHONE SOLICITATION 40

41 I/We agree that the Broker and any affiliated settlement service providers (for example, a mortgage company or title company) may 42 call our/my home or cell phone numbers regarding issues, goods and services related to the real estate transaction until I/we 43 withdraw this consent in writing.

44 List Home/Cell Numbers:

45 **SEX OFFENDER REGISTRY**

- 46 Notice: You may obtain information about the sex offender registry and persons registered with the registry by contacting the
- 47 Wisconsin Department of Corrections on the Internet at: http://offender.doc.state.wi.us/public/ or by phone at 608-240-5830.
- 48 BY SIGNING AND DATING BELOW I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THIS DISCLOSURE AND
- 49 THAT Robin Barraza Manske Property Management, Inc. are working and Sales Associate Firm Name
- as: (Owner's/Listing Broker's Agent) (Buyer's/Tenant's Agent or Buyer's Broker's Agent) STRIKE ONE .
- 52 SIGNING THIS FORM TO ACKNOWLEDGE RECEIPT DOES NOT CREATE ANY LEGAL OBLIGATIONS TO BROKER.

53 54 Signature Date A Signature A

No representation is made as to the legal validity of any provision or the adequacy of any provision in any specific transaction. Copyright 2012 by Wisconsin REALTORS® Association Drafted by Attorney Debra Peterson Conrad

Date A

55 **DEFINITION OF MATERIAL ADVERSE FACTS**

A "material adverse fact" is defined in Wis. Stat. § 452.01(5g) as an adverse fact that a party indicates is of such significance, or that is generally recognized by a competent licensee as being of such significance to a reasonable party, that it affects or would affect the party's decision to enter into a contract or agreement concerning a transaction or affects or would affect the party's decision about the terms of such a contract or agreement. An "adverse fact" is defined in Wis. Stat. § 452.01(1e) as a condition or occurrence that a competent licensee generally recognizes will significantly and adversely affect the value of the property, significantly reduce the structural integrity of improvements to real estate, or present a significant health risk to occupants of the property; or information that indicates that a party to a transaction is not able to or does not intend to meet his or her obligations under a contract or agreement made concerning the transaction.