Owners and Managers:	McCaughey Properties P.O. Box 259446 Madison, WI 53725 (608) 516-9497 (cell) info@mccaugheypropwww.mcccaugheypropww.mcccaugheypropww.mcccaugheypropww.mcccaugheypropww.mcccaugheypropww.mcccaugheypropww.mcccaughe	/ (608) 257-2858 (forties.com	ax)	
Today's Date:	Leas	e Date from:	to	:
Name:	·	Pho:	ne Number	
Number of people:	(other tenant	s must fill out separa	ate applications).	
Social Security Number:			Date of Birth	
Housing References: Min Present Address (include o		f necessary, attach addi	tional information.)	
How Long?	Current Re	ent (your share):		
Landlord's Name:			Landlord's Phon	e
Landlord's Address:				
Previous Address (include				
How Long?				
Previous Landlord's Nan			Prev. Landlord's P	Phone:
Previous Landlord's Add	ress (include city, state &	zip):		
Place of Employment: Supervisor: Previous Employer:	Minimum last two years. (If necessary, attach additional information.) Position: How Long? Supervisor's Phone: How Long? Supervisor's Phone:			
Monthly Gross Income: _ Other income and source				
Bank References:				
Checking: Bank:		Acct. #:		Balance:
Savings: Bank:		Acct: #:		_ Balance:
Vehicles:				
Make:	Model:	Year:	License Nun	nber:
Make:	Model:	Year:	License Nun	nber:
Pets or Animals:				
In Case of Emergency Contact:				
Address (include city, state				
Phone:				
Nearest Relative (not livin Address (include city, state	g with you):			
Phone:				
How Were You Referred	To Us?	(OVER)		

PLEASE READ CAREFULLY, APPLICATION MUST BE SIGNED

I hereby make application to lease the described premises on the terms specified above. I have paid to the agent the earnest money indicated below, which I understand will apply to my security deposit, and/or first month's rent if this application is accepted, otherwise it will be returned in full. I warrant that all statements made herein are true and correct, to the best of my knowledge. I further agree to abide by the rules, regulation and obligations which are included in or made part of the lease.

I hereby authorize the leasing agent, and any consumer or credit reporting agency or bureau authorized by it, to investigate credit and financial responsibility, income level, rental and eviction history, and the statements made with this application. The leasing agent is also authorized to report my performance under this lease to any such agency, person or organization.

If this application is accepted, and I fail to sign and deliver a lease to the property manager within seven days, the earnest money paid, and any subsequent payments, will be retained as damages, subject to the duty of the leasing agent to mitigate. If this application is rejected, the earnest money paid, and all subsequent payments will be promptly refunded by property management. If any funds paid were in the form of a check, the agent may allow a sufficient amount of time for the check to clear before refunding any monies.

I warrant and represent that I am of legal age to enter into this application. I have been provided an opportunity to review a sample lease, as well as rules and regulations. I understand that signing a lease is a legal obligation, and there are penalties for moving out early or canceling the lease. I further understand that this application and the lease impose joint and several obligations that are binding on all tenants.

All applications are subject to the approval of the owner.

Disposition of Deposit: _

I have been advised that the Landlord has actual knowledge of the following uncorrected building code or housing code violations that present a significant threat to the prospective tenant's health or safety: **NONE**

Applicant's Signature:			
	o ask this question, but State law	does not require us to answer it"	
Below for office use only:			
Receipt in the sum of \$	in the form of	is hereby acknowledged	
Credit Bureau Ordered:	Credit Bureau Received:		
Reference Verification Names an			
This Application Was:			
Because:			