

**SYNERGY VENTURES LLC**  
6650 W STATE STREET UNIT D273 ♦ WAUWATOSA, WI 53213  
(206) 415-8474 PHONE/FAX  
[synergychristy@gmail.com](mailto:synergychristy@gmail.com)

**RENTAL APPLICATION**

All information on this application must be completed. You will be denied rental if you misrepresent any information on this application. If misrepresentations are found after a rental agreement is signed, your rental agreement may be terminated. (\_\_\_\_) \*initial here\* indicating you have read & understood this statement

Each applicant 18 years of age or older must complete a separate application.

TODAY'S DATE: \_\_\_\_\_  
UNIT APPLYING FOR: \_\_\_\_\_ DATE REQUIRED: \_\_\_\_\_

**PERSONAL INFORMATION:**

Applicant's Name (first, middle, last): \_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_-\_\_\_\_-\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_

Other residents to occupy the unit:	Date of Birth	Social Security Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

**RENTAL HISTORY**

Present address: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Rent paid: \$ \_\_\_\_\_ Leaving because? \_\_\_\_\_  
Present Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous address: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Rent paid: \$ \_\_\_\_\_ Leaving because? \_\_\_\_\_  
Previous Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

**EMPLOYMENT HISTORY**

Current Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Monthly Income: \$ \_\_\_\_\_  
Position: \_\_\_\_\_ Starting Date: \_\_\_\_\_  
Supervisor: \_\_\_\_\_

Prior/Additional Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Monthly Income: \$ \_\_\_\_\_  
Position: \_\_\_\_\_ Starting Date: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ End Date: \_\_\_\_\_

Other Income (Include amount & frequency): Disability \$ \_\_\_\_/\_\_\_\_ Soc Sec \$ \_\_\_\_/\_\_\_\_  
Child support \$ \_\_\_\_/\_\_\_\_ Rent Assistance \$ \_\_\_\_/\_\_\_\_ Other \$ \_\_\_\_/\_\_\_\_

**REFERENCES**

Personal Reference:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_

**AUTOMOBILE INFORMATION**

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_  
Plate # \_\_\_\_\_ Expiration \_\_\_\_\_

**CRIMINAL BACKGROUND INFORMATION**

Have you ever been convicted of a felony? If yes, explain.

\_\_\_\_\_

Have you ever been convicted of a misdemeanor other than a traffic ticket? If yes, explain.

\_\_\_\_\_

Have you ever received an eviction summons? If yes, explain.

\_\_\_\_\_

Are you on active duty for any branch of military service for the United States of America or the State of Wisconsin? If yes, explain.

\_\_\_\_\_

**PLEASE READ & INITIAL THE FOLLOWING**

**My rental of said premises is to be limited to use and occupancy by family of size and composition noted above without any right on my part to sublet any or all of said premises.**

\_\_\_\_\_ \*initial here\*

**I understand that a security deposit is required against damage or loss to the premises and that said security deposit CANNOT be used for the last month's rent.** \_\_\_\_\_ \*initial here\*

**I authorize SYNERGY VENTURES LLC to contact any reference, employer, or landlord that I have listed, or may have in the future, and to obtain a credit report if necessary, to determine my initial eligibility to rent premises applied for, as well as to confirm continued eligibility on a minimum of an annual basis.** \_\_\_\_\_ \*initial here\*

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office Notes:

\_\_\_ INCOME \_\_\_\_\_

\_\_\_ ID \_\_\_\_\_

\_\_\_ L.L. VERIFIED \_\_\_\_\_

\_\_\_ BACKGROUND \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_