



**COMMON  
WEALTH  
DEVELOPMENT**

1501 Williamson  
Street  
Madison, WI 53703  
(608) 256-3527  
(608) 256-4499 Fax  
www.cwd.org

- Youth-Business Mentoring Program
- Affordable Housing Program
- Madison Enterprise Center
- Main Street Industries
- The Williamson-Marquette Gazette
- Common Wealth Gallery

If you have specific questions about an apartment, please call 255-9782.

If you have specific questions about the application, please call 256-3527 x27

\* Our tax credit apartments require a social security number to process the application.

Updated: 1/25/2010

## APARTMENT RENTAL APPLICATION

Thank you for applying with Common Wealth Development, a non-profit community development corporation committed to preserving the vitality of Madison's Williamson-Marquette neighborhood.

Common Wealth Development is accepting applications for current apartment vacancies. All apartments shall be rented on a first come first served basis, as defined by a completed and verified application.

Please fill out the attached application, completely and accurately, and return it along with last year's tax return to Common Wealth Development in person or by mail.

Once we have reviewed your application and completed the appropriate reference, income, credit, and conviction checks, we will notify you of your application status. If your application is rejected, you will receive prompt written notification as to the grounds for rejection, unless you waive notification.

We have a **no-smoking policy**. Tenants and guests are not allowed to smoke in individual apartments nor anywhere on the premises (at Yahara River View). Sorry, **no dogs allowed**. We follow the City of Madison occupancy rules. However, we do not allow any more than 2 unrelated persons in a household.

### Screening Criteria for All Rental Applications:

**COMPLETED APPLICATION:** Each adult applicant (including spouses, partners, roommates, and adult children) must provide all information requested on the application. **False information or misrepresentations is grounds for denial.**

**INCOME:** An annual income at least 2.5 times the annual rent is required. Income below this level may be acceptable if 1) the applicant can demonstrate actual ability to pay based on paying comparable rent over the past 2 years with comparable income, expenses, and debt, or 2) a third party guarantees the rent payments for the entire lease payment and that person can demonstrate ability to pay. We accept Section 8.

**CREDIT HISTORY:** The history must lack significant or repeated delinquencies or nonpayment.

**RENTAL HISTORY:** We rely on you to provide us with information so that we can easily contact past landlords. Inability to verify rental history is grounds for denial. Rental history is acceptable if it can be verified to be accurate, previous managers would rent to you again, rental payments were made on time, lease obligations have been fulfilled, damage to current and past apartments have been minimal, and security deposits have been returned. Eviction judgments may result in denial.

**BEHAVIOR AT PAST RESIDENCES:** We look for proof that you were cooperative in remedying any complaints or problems and that there was no significant problems with trash removal, property damage, guests, noise, pets, or general sanitation.

**CONVICTION RECORD:** No applicant will be accepted for residence that has been placed on probation, paroled, released from incarceration or paid a fine within the past two years for offenses substantially related to housing, such as violence to persons, destruction of property, drug manufacture, delivery, or sale offense, or disturbance of neighbors.

*Income Restrictions May Apply*

*Common Wealth Development reserves the right to hold barrier-free apartments for households that need barrier-free apartments.*



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

Owned and Managed by Common Wealth Development, an Equal Opportunity Housing Provider

## APARTMENT RENTAL APPLICATION – For Common Wealth Development

Which apartment are you applying for: *(list in order)* \_\_\_\_\_

Anticipated Move-In Date: \_\_\_\_\_

- All applicants 18 years of age and older, not related by blood, marriage or adoption, must complete their own application.
- Attach a copy of your last year's tax return to this application.

PERSONS OCCUPYING THE UNIT			RELATIONSHIP	SOCIAL SECURITY NUMBER	DATE OF BIRTH	STUDENT (Circle One)	
Last	First	Middle				Y	N
1.			Head			Y	N
2.						Y	N
3.						Y	N
4.						Y	N
5.						Y	N

CURRENT ADDRESS	PHONE #'S	EMAIL ADDRESS
Zip Code:	CELL: HOME: WORK:	

GENERAL INFORMATION		
Do you own a pet? <b>DOGS NOT ALLOWED</b>	Y N	What kind? _____ <b>DOGS NOT ALLOWED</b>
Do you own a waterbed?	Y N	Do you carry renter's insurance? ____
Do you smoke?	Y N	<b>CWD apartments are no smoking!</b>
Do you have a right to enter into a lease?	Y N	
Have you ever filed bankruptcy?	Y N	Please explain and include dates:
Have you ever been evicted from an apartment for any reason?	Y N	If yes, please explain
Has there ever been a judgment or foreclosure against you? Do you have collections?	Y N	If yes, please explain
Do you wish to receive a written notice of denial of tenancy?	Y N	
How did you find out about our housing? Newspaper ad, another resident, for rent sign, housing service provider, etc.		If you found out from specific person, please list name: _____



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**LANDLORD INFORMATION** – List landlords for at least **last 3 consecutive years**

From Mo/Yr	To Mo/Yr	Your Street Address, City, State, Zip	Your Landlord's Name, Mailing Address and <u>Phone Number</u>	Rent/Utilities Paid
			Phone number:	
			Phone number:	
			Phone number:	

**VEHICLE INFORMATION**

Color/Car	Make/Year	License Plate Number and State	Driver's License Number

**EMERGENCY CONTACT**

Name	Relationship	Home Phone Number	Work Phone Number

- Y N 1. Are you or anyone in the household currently or soon to become a student? **full-time**  **part-time**   
 (A full-time student is defined as someone who has been or will be a full-time student for 5 months this year.)  
 List name of student(s) \_\_\_\_\_  
 List name of school(s) \_\_\_\_\_
- Y N 2. Are you separated, but not divorced from your spouse?
- Y N 3. Are any household members temporarily absent?  
 Who? \_\_\_\_\_ How Long: \_\_\_\_\_
- Y N 4. Do you expect any changes to your household within the next 12 months?  
 If yes, please explain: \_\_\_\_\_
- Y N 5. Do you plan to have a live-in care attendant?  
 If yes, please list Agency name, contact person, and phone #: \_\_\_\_\_
- Y N 6. Are you receiving Section 8 Assistance? Agency \_\_\_\_\_ Phone # \_\_\_\_\_  
**Caseworker with Section 8: Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_



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# ASSETS

Please list where the asset(s) is held and the current value of each asset(s) for **all** household members. (Attach additional page(s) if necessary)

Circle One	TYPE OF ASSET	WHERE HELD Name/address/Phone # of Institution	Current Balance/ Value	Account #
Y N	Checking Acct. #1	Where: Address: Phone #:		
Y N	Checking Acct. #2	Where: Address: Phone #:		
Y N	Savings Acct. #1	Where: Address: Phone #:		
Y N	Savings Acct. #2	Where: Address: Phone #:		
Y N	Trust Account			
Y N	Certificate of Deposits			
Y N	Money Markets			
Y N	IRA/Keough/401 K			
Y N	Mutual Funds			
Y N	Stocks/Bonds			
Y N	OTHER: <i>please circle and list to the right</i> - Pension/Annuity (NOT Paid Periodically) - Real Estate (FMV- Mortgage Balance) - Land Contract (provide amortization schedule) - Personal Property/Investment - Lump Sum Payment in the past 2 years. - Assets disposed of in the past 2 years.			
Y N	Cash kept at home - \$500 or more on hand, not in checking/savings account.			
Y N	Safe Deposit Box (list contents)			
Y N	Whole Life Insurance Policy			



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**INCOME**

Please indicate each source of **ESTIMATED ANNUAL** income that you receive or anticipate receiving in the next (12) months.

CIRCLE ONE	DESCRIPTION	NAME OF HOUSEHOLD MEMBER	INCOME SOURCE	AMOUNT PER MONTH OR YEAR <small>Please specify</small>
Y N	Employment #1		Where: Contact Name: Phone #:	
Y N	Employment #2		Where: Contact Name: Phone #:	
Y N	Self - Employment (attach 2 years of taxes)			
Y N	Social Security			
Y N	Federal Social Security/Disability <b>APPLICATION CANNOT BE PROCESSED WITHOUT A COPY OF SOCIAL SECURITY AWARD LETTER!</b>			
Y N	State Social Security/ Disability			
Y N	Unemployed/Zero Income			
Y N	Child Support/Alimony (Court Ordered)			
Y N	Unemployment			
Y N	Anticipated Income			
Y N	Other Income			
Y N	Recurring Gift			
Y N	Student Grants			
Y N	Workers Compensation			
Y N	Previous Employment			
Y N	Pension/Annuity (Periodic Payments)			
Y N	Other: <i>please circle and list to the right</i> - Military Compensation - Rental Income/Land Contract Pymts - Lottery Payments (periodic) - Unemployed/Zero Income			

**If you receive Social Security Income, you must attach your last SS award letter.**



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I verify that the information in the attached application is correct and true to the best of my knowledge. I hereby authorize release of any and all information to Common Wealth Development, Inc. regarding my income, assets, credit history, and recognize that CWD will check for any conviction record through public records.

The undersigned certify that the information and statements provided above are true and complete to the best of my/our knowledge and belief. I/We consent to release the information in order to qualify for housing through Common Wealth Development. I/We understand that providing false information or making false statements may be grounds for denial of my/our application and may subject me/us to criminal penalties. I/We agree to provide verifications of all income and assets as required by the Owner or its agent. I/We further authorize disclosure of all information which will verify my/our income and assets. I/We understand applicants must be eligible for the Section 42 Tax Credit, HOME or other Common Wealth Development programs. This also includes property tax exemption requirements. Subject to approval, this will be my/our primary residence.

A credit check will be completed through a credit bureau. By completing this application, applicant grants management permission to confirm the above information supplied by applicant. The Fair Credit Reporting Act requires that management disclose to applicant that an investigative consumer report including information as to applicant's character, general reputation, personal characteristics and mode of living will be made.

**Each Applicant 18 years of age or older must sign and date below.**

Signature _____	Date _____
Signature _____	Date _____
Signature _____	Date _____
Signature _____	Date _____



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