

THE SAXONY APARTMENTS
305 NORTH FRANCES STREET
MADISON, WI 53703
(608) 255-9353 * FAX (608) 255-9445
www.saxonyapartments.net

RENTAL APPLICATION

DATE _____ S.S.# _____

NAME _____
 LAST FIRST MIDDLE

BIRTHDATE ___/___/___ MALE ___ FEMALE ___ TELEPHONE _____

PRESENT ADDRESS _____

EMAIL ADDRESS _____

2 YEAR HOUSING HISTORY (PLEASE COMPLETE 2 YEARS IN FULL – PHONE NUMBERS ARE ESSENTIAL)

START	END	APARTMENT NAME	ADDRESS	CITY	STATE/ZIP
1. _____	_____	_____	_____	_____	_____/____
		LANDLORD _____	ADDRESS _____		
		LANDLORD PH: _____	RENT PAID _____		
2. _____	_____	_____	_____	_____	_____/____
		LANDLORD _____	ADDRESS _____		
		LANDLORD PH: _____	RENT PAID _____		

2 YEAR EMPLOYMENT HISTORY (PLEASE COMPLETE 2 YEARS IN FULL)

EMPLOYER _____	ADDRESS _____	
POSITION _____	SUPERVISOR _____	PHONE _____
FROM _____	TO _____	INCOME/MONTH _____
EMPLOYER _____	ADDRESS _____	
POSITION _____	SUPERVISOR _____	PHONE _____
FROM _____	TO _____	INCOME/MONTH _____

PARENTS' NAME _____

PARENTS' ADDRESS _____ / _____ PHONE _____
 STREET CITY STATE/ZIP

PERSONAL REFERENCE _____ PHONE _____

ADDRESS _____ RELATIONSHIP: _____

I AM A STUDENT AT _____ (SELECT ONE) FR SO JR SR GRAD PhD OTHER

TYPE OF ROOM:

SINGLE WITH PRIVATE BATH & 2 PEOPLE SHARE KITCHEN ___M ___L

SINGLE WITH PRIVATE BATH NO KITCHEN _____ 1 BEDROOM ___ Interior ___ End ___ Large

2 BEDROOM Floor Plan A ___ B ___ C ___

3 BEDROOM _____ EFFICIENCY S ___ M ___ L ___

APPLYING FOR: 1 SEMESTER _____ ACADEMIC YR. (8/15 – 5/31) _____ 12 MONTH (8/15 – 8/12) _____

Co Applicant Names: _____

OK'D BY _____ ROOM NUMBER _____ APPLICANT'S SIGNATURE _____

Pets: I understand that pets are not allowed at The Saxony and I agree not to house a pet for any reason.

Walls: I agree to use small nails or tacks to hang pictures. I agree not to put tape or sticky substances such as contact paper, stickers, and the like on walls, cabinets, doors, windows, or furniture. I agree not to paint any walls, furniture, appliances or fixtures. I understand that any damages caused by my doing so will be repaired at my expense.

Smoke Detectors: I understand that smoke detectors have been installed for my safety and I agree that will not tamper with the detector in any way. I agree to inform the management when the smoke detector is not functioning properly.

Roommates: I agree to accept suite mates as are assigned. I understand that rooms are rented as a single unit and that no one but myself may occupy the room. Non-Smoking Building.

Noise: I agree not to play a stereo, TV, musical instrument, or make loud noises as to disturb other residents of The Saxony. I also understand that I am fully responsible for the actions and noise of any guest I have at The Saxony.

Parking: I agree not to park my car or let my guests park their cars in The Saxony parking lot without prior authorization from management. I further understand that any unauthorized vehicle in the lot will be fined, by the Madison Police Department and/or towed for which I am fully responsible to pay. Management is not responsible for any damage to vehicles.

Application: I attest the information I have provided the Saxony management on this application is true and accurate to the best of my knowledge. Any false or incomplete information may result in the rejection of this application. I give Saxony Management consent to a routine inquiry of references and credit agencies concerning applicant's character, credit worthiness and reliability. I wish to receive a written explanation of a denial of tenancy: YES _____ NO _____

The Saxony Apartments were constructed before 1978. Therefore we will supply you with a "LEAD PAINT DISCLOSURE PAMPHLET" with each lease.

RESIDENT SIGNATURE: _____ Date _____

Copy of the above is available upon request. Original will be on file.