



WCW Tenant Screening

A Division of WCW Enterprises, Inc.
PO Box 3864, Topeka, KS 66604
785-273-9419 Office * 785-273-0875 Fax

!!!! Do not fill out this application until you have a property in mind to rent !!!!
If you have a co-signer, or someone else who will be paying any part of or all of your rent, we need a completed application on them too. Each application requires a non-refundable \$35.00 processing fee. 18 years of age or older must complete an application and will be required to sign the lease.

!!!! The more complete the application, the better your chances of being approved !!!!

Last Name: _____
First Name: _____ MI: _____
Email: _____ Contact Phone #:(____) _____
Date of Birth: _____ Social Security Number _____
DL#: _____ State of Issue: _____
MUST HAVE IN ORDER TO PROCESS APPLICATION

Address you are applying for: _____
Why are you moving? _____
What is the amount of rent asked on the new property?: _____

Owner/Manager/Company (you're applying for housing/space through)
Name: _____
Contact #:(____) _____ Fax #:(____) _____

Date to occupy: _____ Length of lease: _____
Do you smoke? Y___ N___ Pets: Y___ N___
Cat(s) ___ Dog(s) ___ Other___ How many & what breed?

18 and older who will occupy:

NAME	RELATIONSHIP



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Younger than 18 who will occupy:

NAME

RELATIONSHIP

NAME	RELATIONSHIP

In case of emergency we notify:

Name: _____

Address: _____

Phone Number: (____) _____

RENTAL HISTORY

Please indicate the past two landlords you have rented from:

PRESENT:

Address: _____

City: _____ State: _____ Zip: _____

MUST HAVE FULL, EXACT ADDRESS TO PROCESS APPLICATION. PARTIAL ADDRESSES WILL NOT WORK

Phone: (____) _____

From: _____ To: _____

Landlords Name: _____

Phone: (____) _____ *MUST HAVE WORKING LANDLORD NUMBER TO PROCESS APPLICATION*

Rent Amount: \$ _____

PREVIOUS:

Address: _____

City: _____ State: _____ Zip: _____

From: _____ To: _____

Landlords Name: _____

Phone: (____) _____ *MUST HAVE WORKING LANDLORD NUMBER TO PROCESS APPLICATION*

Rent Amount: \$ _____



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EMPLOYMENT AND REFERENCES

MILITARY:

Current Status _____

Branch _____

CURRENT:

Employer: _____

Position Held: _____

Hired: _____

*MUST HAVE CURRENT PAY STUBS IN
ORDER TO PROCESS APPLICATION*

Phone: (____) _____

Supervisor: _____

Gross Monthly Income: \$ _____

Any other income (monthly) (e.g. Child support, SSI, other subsidies, dividends, etc.): _____

* If self employed, have commission income, or your company won't readily provide income verification, you'll need to provide us with at least two of your last paycheck stubs and/or your last year's 1040 cover sheet so we can verify your income.

PREVIOUS:

Employer: _____

Position Held: _____

From: _____ To: _____

Phone: (____) _____

Supervisor: _____

Gross Monthly Income: \$ _____

OTHER REFERENCES:

Bank: _____

Phone: (____) _____ Account #: _____

Address: _____

Bank: _____

Phone: (____) _____ Account #: _____

Address: _____

PERSONAL REFERENCES:

(do not include immediate family)



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Name: _____

Phone: (____) _____

Name: _____

Phone: (____) _____

Name: _____

Phone: (____) _____

AUTOMOBILE(s)/MOTORCYCLE(s)/TRUCK(s):

Make: _____

Model: _____

Year: _____ Color: _____

License Number: _____

State Licensed Issued In: _____

Make: _____

Model: _____

Year: _____ Color: _____

License Number: _____

State License Issued In: _____

Have you ever been convicted of a felony? Y _____ N _____

If your answer is yes, state the offense you were convicted for:

Have you ever been evicted? Y _____ N _____

If yes, state why you were evicted:

I authorize WCW Property Management and the Owner/Landlord/Manager to process this application and to conduct all necessary background and credit checks needed.

Signature of Applicant

Date