

# Goldleaf Development, LLC

2379 University Avenue  
Madison, WI 53726  
(608) 233-4423 or (608) 257-6561  
Fax (608) 232-0529  
[campus@goldleafdevelopment.com](mailto:campus@goldleafdevelopment.com)  
[www.goldleafdevelopment.com](http://www.goldleafdevelopment.com)

Property Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Lease Terms: From \_\_\_\_\_ To \_\_\_\_\_  
Rent/Month: \$ \_\_\_\_\_ Security Deposit: \$ \_\_\_\_\_  
Utilities Included: \_\_\_\_\_ Heat \_\_\_\_\_ Water \_\_\_\_\_ Gas \_\_\_\_\_ Electricity  
Application Taken By: \_\_\_\_\_ Date: \_\_\_\_\_  
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APPLICANTS FULL NAME: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Present Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Present Telephone #: ( \_\_\_\_\_ ) \_\_\_\_\_  
Present Landlord: \_\_\_\_\_ Telephone #: ( \_\_\_\_\_ ) \_\_\_\_\_  
Previous Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Previous Landlord: \_\_\_\_\_ Telephone #: ( \_\_\_\_\_ ) \_\_\_\_\_  
Monthly Net Income: \_\_\_\_\_ Verification Telephone #: ( \_\_\_\_\_ ) \_\_\_\_\_  
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## **APPLICANT AGREES THAT:**

1. The information on this application is correct and I authorize agents for Goldleaf Development, LLC to obtain my credit report from the Madison Credit Bureau as well as to contact any references listed.
2. I have not been convicted of a crime within the past two years and I have authorized agents for Goldleaf Development, LLC to obtain a criminal background report.
3. Goldleaf Development, LLC reserves the right to refuse any application, which proves to be fraudulent or has insufficient information.
4. Goldleaf Development, LLC shall have up to 21 Calendar days from acceptance of the earnest money to approve or deny the rental applications.
5. If applicant is accepted and becomes a tenant, not less than seven days after the start of the tenancy, tenant may request, in writing, that landlord provide tenant with a list of physical damages or defects, if any charged to the previous tenant's security deposit.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FOR OFFICE USE ONLY:  
Reference Verification**

Present Landlord: \_\_\_\_\_

Date left message: \_\_\_\_\_

Credit Report: \_\_\_\_\_

Income Verification: \_\_\_\_\_

Co-Signer Needed: \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, date form sent out: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date form received back: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Criminal Background Results: \_\_\_\_\_

Application Approved: \_\_\_\_\_ Application Denied: \_\_\_\_\_

If denied, reason for denial: \_\_\_\_\_

Date sent denial form: \_\_\_\_ / \_\_\_\_ / \_\_\_\_