

Central Wisconsin Community Action Council, Inc.

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Rental Housing Pre-Application Form

Applicant 1

Name: _____
First Name Middle Initial Last Name

Date of Birth: _____

Applicant 2

Name: _____
First Name Middle Initial Last Name

Date of Birth: _____

Current Mailing Address: _____
Street Address City State Zip

Email: _____ List additional household members BELOW:.

Telephone: _____

If you own a home or property, what is the fair market value? _____

List all income for each adult (18+) household member applying for rental housing. Attach additional pages, if necessary.

Income Recipient (Applicant 1 or 2)	Income Source	Type of Income (Social Security, pension, annuity, etc.)	Amount	Frequency (weekly, monthly, annually)

List all assets owned by each adult (18+) household member applying for rental housing. Attach additional pages, if necessary.

Asset Owner (Applicant 1 or 2)	Type of Asset (Real estate, stocks, checking, savings accts.)	Amount of Income from Asset (Interest rate, etc.)	Value of Asset

Do you require any special accommodations? If so, please explain. _____

Signature of Applicant 1 _____

Date _____

Signature of Applicant 2 _____

Date _____