Transforming People and Communities

f In

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orporate Headquarter:	2900 Hoover Road, Suite A	Stevens Point, WI	5448
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capservices.org

ocation	ı(s) you are	interested in:	Rental Ho	usir	ng Pre	-Applica	ation Form		
Berl	lin	Colby	Clintonville	Iola		Manawa	Mauston	Montello	Nekoosa
	Seymour	Waupaca	Wausau		Waut	oma	Westfield	Weyauwega	Wisconsin Rapid
	Applicant								
Ę	Name:	First Name				Middle Initial			Last Name
Applicant Intormation	Date of Bir	rth:					_		
Ε	Applicant	: 2							
<u> </u>	Name:	First Name				Middle Initial			Last Name
= =	Date of Bir	rth:					_		Last Name
<u>5</u>	Current M	ailing Address:							
<u>5</u>							City any additional house	State Phold members?	^{Zip} Yes □ No
[· <u>—</u>
	reiepnone	:			_	if yes, list	their names & dates	of pirth on back of	tnis sneet.
	List all inco	me for each adult (18	+) household memb	er apply				es, if necessary.	
	Incon	ne Recipient	Income Source			e of Income al Security, pens	_		Frequency (e.g. weekly, monthly,
1	4		meome sourc	(c.g. social se		nnuity, etc)	Sion, Ame		annually)
5									
NCOME									
_									
	List all asset	t all assets owned by each adult (18+) household member applying for rental housing. Attach additional pages, if necessary. Type of Asset							y.
		set Owner	(e.g. real estate, sto		eckina		t of Income from Asset		Value of Asset
T S	(Applicant 1 or 2)		account, savings, etc)			(e.g. interest rate, etc)			
SE									_
AS									
	D	a h a 2 🗆 V						l	
		vn a home? Yes							
	How did y	ou hear about us?							
	Signature (Ap	oplicant 1)					Date		
	Signature (Applicant 2)						Date		



