

Office Location
3219 Leavenworth St.
Omaha, NE 68105

Wistar Group
Office (402) 559-0363 Fax (402) 502-2298
www.wistargroup.com

Mailing Address
P.O. Box 31453
Omaha, NE 68131

Application for Occupancy

*** Application fee \$50.00



PLEASE PRINT CLEARLY

Today's Date _____

Address applied for _____ ?

Are you currently renting at this time? Y N

Preferred move in date: _____

Your Legal Name _____

Date of Birth: _____

Your contact phone _____

Your E-mail _____

Your SS# _____

Or Your ITIN# _____

Your Driver's License # _____ State _____

You MUST provide a current government picture ID to apply

Your Current Employer _____
Company Name Address

Your Current Job Position: _____ How long have you been employed with your employer? _____
Years Months

Verifiable Monthly Income \$ _____ (before taxes) You MUST have verifiable proof of income to apply.

Supervisor's Name: _____ Supervisor's contact number: _____

Your Present Living Address _____
Street Apt# City State Zip Code

Can you provide a lease with your name on it? Y N _____

Present Landlord: _____ Landlord Contact Number : _____

How long have you lived at your current address? _____ Years _____ Months

Are you related to the Landlord? Y N Total Number of people who will occupy unit? _____

1. _____ YOURSELF _____
First and Last Name Age Relationship

3. _____ 4. _____
First and Last Name Age Relationship First and Last Name Age Relationship

5. _____ 6. _____
First and Last Name Age Relationship First and Last Name Age Relationship

Wistar Group / AGENT NOTES

