

# Application for a apartment

**Kath. Wohnbauwerk Passau GmbH**

Ludwigsplatz 3, 94032 Passau

Tel.: 0851/490 593 -0, Fax: -11

E-Mail: info@wohnbauwerk-passau.de



<b>1. Area (Passau/County/City)</b>	
<b>2. Size</b>	<b>m<sup>2</sup></b> <span style="float: right;"><b>rooms</b></span>
<b>3. Money you can spend</b>	
<b>4. Moving-in date</b>	

## 5. Personal

Fist- and Sure name	
Address	Birth name
Post zip	Phone number
	E-Mail
Date of birth	Religion
country	Natonality
Familystatus	<input type="checkbox"/> singel <input type="checkbox"/> marrid <input type="checkbox"/> dinorced <input type="checkbox"/> widowd <input type="checkbox"/> living apart
Do you have any depts?	<input type="checkbox"/> No <input type="checkbox"/> Yes, (EUR):
Do you have summons?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Do you have a declaration of personal bankruptay?	<input type="checkbox"/> No <input type="checkbox"/> Yes

## 6. Informations of your husband or wife

Fist- and Sure name	
Address	Birth name
Post zip	Phone number
	E-Mail
Date of birth	Religion
country	Natonality
Familystatus	<input type="checkbox"/> singel <input type="checkbox"/> marrid <input type="checkbox"/> dinorced <input type="checkbox"/> widowd <input type="checkbox"/> living apart
Do you have any depts?	<input type="checkbox"/> No <input type="checkbox"/> Yes, (EUR):
Do you have summons?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Do you have a declaration of personal bankruptay?	<input type="checkbox"/> No <input type="checkbox"/> Yes

## 7. Kids who will move in

	Person 1	Person 2
Fist- and Sure name		
Date of birth		

	Person 3	Person 4
Fist- and Sure name		
Date of birth		

## 8. Are you favored persons?

<input type="checkbox"/> big Familie (more than 3 kids)	<input type="checkbox"/> Number of kids
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<input type="checkbox"/> disable person	
<input type="checkbox"/> refugee	Country of origin

**9. Occupation**

	Person 1	Person 2
Occupation		
company you work for		
served since		

**10. Self-Disclosure**

Income per month (€)	
Income per month (your partner) (€)	
any other income - Jobcenter/benefit/child benefit/ social benefit (€)	
Do you have pets? <input type="checkbox"/> No <input type="checkbox"/> Yes (Which?)	

**Note: If you will move in a pet - pls inform us! We have to approve this!**

Name and address of you currently lessor?
How long do you live in the apartment?

Why do you like to move?

**Note:**

I assure that the informations are true.

I am aware that false informations justify the Kath. Wohnbauwerk GmbH to a extraordinary termination.

The Kath . Wohnbau GmbH can view from your financial circumstances information in the Creditreform Regensburg.  
The delivery of these self-disclosure obligation neither Kath. Wohnbau GmbH or me to conclude a lease .

Due to this application, the Kath. Wohnbauwerk GmbH store the personal data for appropriate use.

_____	_____
Signature	Signature

*We urge you to contact at certain intervals on the allocation prospects for an apartment.*

*If within one year no inquiry from you is confirmed, the home application is deemed irrelevant .*