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Rental Application

**\$50 APPLICATION FEE MUST BE PAID TO PROCESS APPLICATION
ALL QUESTIONS MUST BE ANSWERED TO PROCESS APPLICATION**

ADDRESS OF PROPERTY APPLYING FOR: _____ DESIRED MOVE-IN DATE: _____
APPLICANT NAME: _____ SOCIAL SEC. #: _____
AGE: _____ BIRTHDAY: _____ DRIVER'S LIC. #: _____
PHONE #: _____ EMAIL ADDRESS: _____

MARITAL STATUS: MARRIED () SINGLE: () DIVORCED: () SEPARATED: ()

SPOUSE NAME: _____ SOCIAL SEC. #: _____
AGE: _____ BIRTHDAY: _____ DRIVER'S LIC. #: _____
PHONE #: _____ MAIDEN NAME: _____

PLEASE LIST ANYONE ELSE THAT WOULD OCCUPY THE PROPERTY:

	NAME	AGE	RELATIONSHIP
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____
4)	_____	_____	_____

PRESENT ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____
MONTHLY RENT: \$ _____ LENGTH OF STAY: _____ CURRENTLY OWE RENT? _____
REASON FOR MOVING: _____
LANDLORD NAME: _____ PHONE #: _____
HAVE YOU EVER: BEEN EVICTED? _____ FILED BANKRUPTCY IN THE LAST 7 YEARS? _____
IF YES, DATE FILED: _____ BEEN CONVICTED OF A FELONY? _____
IF YES, TYPE & DATE: _____

CURRENT EMPLOYER: _____ OCCUPATION: _____
HIRE DATE: _____ MONTHLY SALARY: _____
SUPERVISOR NAME: _____ PHONE NUMBER: _____

SPOUSE'S CURRENT EMPLOYER: _____ OCCUPATION: _____
HIRE DATE: _____ MONTHLY SALARY: _____
SUPERVISOR NAME: _____ PHONE NUMBER: _____

CREDIT REFERENCES:

	COMPANY NAME	RELATIONSHIP	PHONE #
1)	_____	_____	_____
2)	_____	_____	_____

NUMBER OF PETS: _____ TYPE(S): _____ AGE: _____ WEIGHT: _____

EMERGENCY CONTACT: _____ RELATION: _____ PHONE #: _____

The undersigned furnished the above as being a full, true, and correct statement on the date given below. The undersigned hereby authorizes the management firm or any employee of the management firm to obtain a credit report from any credit reporting agency and to interview third parties, such as family members, business associates, financial sources, friends, and neighbors. This inquiry includes information as to character, general reputation, and mode of living.

DATE: _____ SIGNATURE: _____

DATE: _____ SIGNATURE: _____