

\$65.00 Per Person 18 Years Or Older - Non-Refundable Application Fee

RENTAL ADDRESS _____ DESIRED OCCUPANCY DATE _____



PROPERTY MANAGEMENT & REFERRAL SERVICES

5906 Main Street, Suite 132, Ooltewah, TN 37363
Phone: (423) 238-7325 Fax: (423) 238-7396

Rental Application

Date: ___ / ___ / ___

Lessee(s) <u>Name(s)</u>	<u>SS#(s)</u>	<u>Birth Date</u>
1. _____ (Primary) Last, MI First	____ - ____ - ____	____ - ____ - ____ (mm) (dd) (yy)
2. _____ Last, MI First	____ - ____ - ____	____ - ____ - ____ (mm) (dd) (yy)

Current Phone Numbers	Drivers Licenses	Email Address (Optional)
1. ____ - ____ - ____ State Number	_____	_____
2. ____ - ____ - ____ State Number	_____	_____

Current Address

Street City State Zip

Currently: Rent or Own

Previous Address (If current Address is less than 3 years)

Street City State Zip

Will there be *ANY* SMOKERS on premises? ___ Yes ___ No **NOTICE: CONFIRM IF SMOKING**

Will there be *any* PETS living on premises? ___ Yes ___ No **AND/OR PETS ARE PERMITTED**



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Employment

Company	Supervisor	Phone	Employment Length	Salary
1. _____	_____	____ - ____ - ____ (ext. ____)	_____	\$_____/hr/wk/bi-wk/mo
2. _____	_____	____ - ____ - ____ (ext. ____)	_____	\$_____/hr/wk/bi-wk/mo
3. _____	_____	____ - ____ - ____ (ext. ____)	_____	\$_____/hr/wk/bi-wk/mo

Job History (If current Employment is less than 3 years)

Company	From	To	Reason for Leaving
1. _____	____/____/____	____/____/____	_____
2. _____	____/____/____	____/____/____	_____

Current Debts

Creditor	Current Total Owed	Payments
1. _____	\$_____	\$_____/wk/bi-wk/mo
2. _____	\$_____	\$_____/wk/bi-wk/mo
3. _____	\$_____	\$_____/wk/bi-wk/mo
4. _____	\$_____	\$_____/wk/bi-wk/mo

Landlord Name

Landlord Name	Phone	Length of Tenancy	Current Rent
Current _____	____ - ____ - ____	_____ Mo/Yrs	\$_____
Previous _____	____ - ____ - ____	_____ Mo/Yrs	Previous Rent \$_____

Prior Evictions? ____ Yes ____ No

If so, Explain: _____



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Have you ever been convicted of a felony OR misdemeanor? ____ Yes ____ No

If so, when? _____

Explain: _____

Additional Information: _____

References:

Name:	Relationship (<i>at least 2 non-related</i>):	Phone:
1. _____	_____	_____-_____-_____
2. _____	_____	_____-_____-_____
3. _____	_____	_____-_____-_____
4. _____	_____	_____-_____-_____

I certify that the above information is correct and truthful and I give **REALTY SPECIALISTS** permission and consent to obtain the above information in addition to a credit report, eviction records, and federal and state background checks as needed.

Signed _____
(please type your full name as a digital signature)

Date: _____

Signed _____
(please type your full name as a digital signature)

Date: _____

