

RENTAL APPLICATION



PROPERTIES

Charlotte 423-667-5760
 1615 Lois St Cleveland TN 37311
 www.kaceproperties.com

Separate Application Required for Each Applicant

Rental Property Address **1852 Westland Drive**
 Term of Rental: YEAR TO YEAR

<u>Tenant Financial Obligation Prior to Occupancy</u>		<u>CONTACT CHECKLIST</u>
First Month's Rent:	700	Current Landlord Contacted - Timely Remittance [] Yes [] No
		Current Employer Verified:
		Credit Report Determination:
Security Deposit	450	[] Yes [] No
		Income Verified (pay stub, employer, etc.)
TOTAL:	1150.00	[] Yes [] No

DEPOSITS ARE NON REFUNDABLE

DESIRED DATE OF MOVE-IN:

DESIRED LEASE TERM (check one): 1 YEAR TERMS 2 YEAR LEASE SECURES CURRENT RENT

UNIT TYPE: 1 2 3 BR 4 Bedroom

APPLICANT INFORMATION:

Name (full legal name): _____

Social Security Number: _____ - _____ - _____ DOB: ____ / ____ / ____

Home Phone: _____ Work Phone: _____

Driver's License / ID Number: _____ State: _____

EMAIL ADDRESS: _____

SPOUSE INFORMATION:

NAME: _____

Social Security Number: _____ DOB: _____

Home phone: _____ Cell: _____

Driver's License number: _____

Email: _____

NAME OF OCCUPANTS AND RELATIONSHIP TO APPLICANT:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

APPLICANT / OCCUPANT VEHICLE(S):

Make: _____ Model: _____ Year: _____ Tag#: _____

Make: _____ Model: _____ Year: _____ Tag#: _____

EMPLOYMENT HISTORY:

Current Employer:

Name and Address: _____

Phone: _____ Supervisor: _____

Length of Employment: Begin _____ Still employed? (check one) ___ yes ___ no

Previous Employer

Name and Address: _____

Phone: _____ Supervisor: _____

Length of Employment: Begin _____ End _____

RENTAL HISTORY:

Current Address: _____

Dates Lived at This Address: From _____ to _____

Reason for leaving: _____

Landlord/Manager: _____ Landlord/Manager's Phone: _____

Previous Address: _____

Dates Lived at This Address: From _____ to _____

Reason for leaving: _____

Landlord/Manager: _____ Landlord/Manager's Phone: _____

INCOME:

Gross Monthly Employment Income Before Deductions: \$ _____

Gross Monthly Income From Other Sources (average): \$ _____

TOTAL GROSS MONTHLY INCOME: \$ _____

MISCELLANEOUS: (check appropriate answer)

Absolutely no Pets!

Do you smoke? ____ yes ____ no UNITS ARE NON SMOKING!

Do you plan to have water filled furniture on the rental property? ____ yes ____ no If yes, detail below.

Have you ever been evicted? ____ yes ____ no If yes, explain below.

Have you ever been convicted of a felony? ____ yes ____ no If yes, explain below.

Have you ever filed for bankruptcy? ____ yes ____ no If yes, explain below.

Explanation: _____

APPLICANT PERSONAL REFERENCES:

Name: _____ Relationship: _____

Address: _____ Phone: _____

Known this reference how long? _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Known this reference how long? _____

Name: _____ Relationship: _____

APPLICANT EMERGENCY CONTACT INFORMATION:

Contact in Emergency (Name): _____ Relationship: _____

Emergency Contact Address: _____ Phone: _____

I hereby certify and affirm that all information provided above is true and correct. I fully understand that my lease or rental agreement may be terminated if I have made any false, misleading or incomplete statement(s) in this application. I hereby authorize verification of all information provided in this application, including financial and credit information, via credit bureaus and/or contact with current and previous employers, current and previous landlords and personal references.

TENANT SIGNATURE

TENANT SIGNATURE:

Tenant must also sign the Landlord Reference Sheet.



LANDLORD REFERENCE CHECK FORM

This applicant for our property has listed you as a previous landlord. Please help us by filling out this information and faxing or emailing it back to us. Thank you for your time.

Charlotte Jones
423-667-5760
charlotte@kaceproperties.com

Previous Landlord: _____
Company/Relationship: _____

Date: _____
Applicant name: _____

Phone #: _____
Address (if mailing): _____

I authorize _____, its subsidiaries, or its managing agents to investigate my rental history. The investigation may include, but is not limited to, the questions listed below.

Signature

Date

Signature

Date

To be completed by landlord

Dates of residency: From _____ to _____. Total number of months _____

1. Did the resident pay their rent on time? _____
If the resident was late on the rent, how late? _____
How often? _____ Comments _____

How much rent was paid each month by this resident? _____

3. Did you receive a security deposit? _____
_____ How much of it was returned to the resident? _____

4. Did the resident, their guests, or their family damage the apartment or the property? _____
_____ Did they pay for the damages? _____ Amount of damages \$ _____

5. Were the police ever called as a result of the disturbance? _____ Date _____
_____ Comments: _____

Were there problems with the neighbors? _____

7. Does the resident have pets or other potential problems that may be important for a landlord to know? _____

8. Did the resident violate the lease agreement in any way? _____

_____ Comments: _____

9. Did the resident give you proper notice for vacating? _____

_____ Reason for leaving? _____

Would you re-rent to this resident? _____

11. What previous address do your records indicate? _____

Comments: _____

Signature: _____

Date: _____

Title: _____

Company: _____