

TENANT APPLICATION**Accredited Property Management 812 Wren Road Goodlettsville TN 37072****Attention: Brooke Pruitte (ofc) 615-855-1151 (fax) 615-855-1181**

Name	Social Security #	Driver's License # <small>(State & #)</small>	Birth Date
I hereby apply to rent/lease the property at: <small>(please include unit number if applicable)</small>			
Desired Move-In Date:		Desired Lease Term:	
PHONE#(s) <small>(home)</small>	<small>(cell)</small>	<small>(work)</small>	
Email address:			

Current home address:			Prior home address:		
City:	State:	Zip:	City:	State:	Zip:
How long at address (month/year):			How long at address (month/year):		
Rent Paid:			Rent Paid:		
Mgr. Name and Phone #:			Mgr. Name and Phone #:		
Reason for leaving:			Reason for leaving:		

New or Current Employer:		Current or Previous Employer:	
Monthly Salary:	Occupation:	Monthly Salary:	Occupation:
Supervisor Name & Phone #:		Previous Supervisor Name & Phone #:	
Work Address:		Previous Work Address:	
How long:		How long:	

CO-APPLICANT INFORMATION

Name	Social Security #	Driver's License # <small>(State & #)</small>	Birth Date
PHONE#(s) <small>(home)</small>			
<small>(cell)</small>		<small>(work)</small>	
Email address:			

Present Address:	Previous Address:
Reason For Leaving:	Reason For Leaving:

Current Employment:		Previous Employment:	
Monthly Salary:	Occupation:	Monthly Salary:	Occupation:
Employer Name & Phone #:		Previous Employer Name & Phone #:	
Work Address:		Previous Work Address:	
How long (month/year):		How long (month/year):	

Personal References (other than family) Three for each Applicant(A) & Co-Applicant (CO-A)	City, State	Relationship	Phone Number	Time Known
A				
A				
A				
CO-A				
CO-A				
CO-A				

Vehicle	Make	Year	Color	License #	State

Please List All Proposed Occupants :			
Name:	Birth Date:	Name:	Birth Date:
Name:	Birth Date:	Name:	Birth Date:
Name:	Birth Date:	Name:	Birth Date:

Do you have pets?	Describe:
Do you have a waterbed?	Do you have a fish tank?

CREDIT REFERENCES:

Name on Acct.	Creditor	Account Type	Monthly Payment	Balance

Name on Acct.	Bank	Account Balance	Savings	Checking

Have you or any potential occupant ever:

Had any credit problems?*	Ever filed for bankruptcy?*
Been evicted or asked to move out?*	Broken a lease or rental agreement?*
Been sued for non-payment?*	Been sued for damages to rental property?*
Had an unlawful detainer filed against you?*	Had a recorded lien, garnishment or judgment?*
Been convicted or plead guilty of selling, possessing, distributing, or manufacturing illegal drugs? *	
Been convicted or plead guilty to a misdemeanor involving violence, sexual misconduct, or honesty?*	
Been convicted or plead guilty to a felony?*	
<u>*If yes, use separate sheet of paper and attach as necessary.</u>	

IN CASE OF EMERGENCY CONTACT:	
Relationship:	Phone # (s):

Applicant represents that statements made are true and correct and here by authorizes verification of references to include but not limited to credit checks, criminal history, rental history, employment, salary, public records, and other qualities and history pertinent to qualifications for residency. I authorize verification of the information contained herein solely for the purpose of establishing my qualifications as a tenant. I release anyone verifying such information or providing information from liability. I understand that incomplete or incorrect information provided in the application, may cause a delay in processing and can result in denial of tenancy. My signature below allows a photocopy or fax copy of this authorization to be as valid as the original.

Date:	Applicant Signature:
Date:	Applicant Signature:

All Applicants Must Attach A Copy Of A Valid Photo I.D.

Application Fee Paid: _____ File# _____

Status (Approved / Denied)

Owner / Agent

Date

Owner / Agent

Date