## **SHACKELFORD PROPERTIES**

## **RENTAL APPLICATION**

LANDLORD
Jennifer Shackelford
1620 East Main St.
Murfreesboro, TN 37130

Phone 896-9565
This application is made to rent
For a term of TWELVE MONTHS to begin on
Monthly Rent for the premises will be \$ payable in advance. First month CASH OR CERTIFIED CHECK made to the order of JENNIFER SHACKELFORD.  SECURITY DEPOSIT \$ CASH OR CERTIFIED CHECK
APPLICATION INFORMATION
NAME Age
No of occupants: Adults Children
Names and ages
List all pets that you would like considered with this application
TWO FORMS OF INDENTIFICATION – ONE OF WHICH MUST BE A PICTURE ID are to be presented with this application
PRESENT ADDRESS:
HOME PHONE # CELL PHONE #
How long at present address
Are the utilities in your name @this address?
LANDLORD'S NAME
LANDLORD'S ADDRESS
LANDLORD'S PHONE NUMBER
IS THE LANDLORD A RELATIVE OR FRIEND?
DOES THE LANDLORD OWN THE PROPERTY
WHAT IS YOUR CURRENT RENT PAYMENT?
WHY ARE YOU MOVING?

PRIOR ADDRESS:		
HOW LONG AT PRIOR ADDRESS?		
LANDLORD'S NAME		
LANDLORD'S PHONE NUMBER		
RENT PAYMENT PER MONTH		
REASON FOR MOVING		
APPLICANT'S SOCIAL SECURITY NUMBER		
APPLICANT'S DRIVER'S LICENSE NUMBER		
VEHICLE MODEL	VEHICLE TAG #	
VEHICLE MODEL	VEHICLE TAG #	
CURRENT EMPLOYER		
EMPLOYER		
EMPLOYER ADDRESS		
POSITION	HOW LONG	
SUPERVISOR		
HIS/HER BUSINESS PHONE NUMBER		
ANNUAL INCOME		
BANK REFERENCES		
NAME OF BANK		
CITY		
ACCOUNT NUMBER		

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MISCELLANEOUS INFORMATION	
NEAREST RELATIVE NOT LIVING WITH Y	YOU
RELATIONSHIP	
HOME PHONE NUMBER	
HOME ADDRESS	
PERSONAL REFERENCES	
NAME	
ADDRESS	
PHONE NUMBER	RELATIONSHIP
NAME	
ADDRESS	
PHONE NUMBER	RELATIONSHIP
CREDIT REFERENCES	
CREDIT CARD NAME	
ACCOUNT NUMBER	CREDIT LIMIT
BALANCE OWED	MONTHLY PAYMENT
PURCHASES (E.G. STORE ACCOUNT)	
ACCOUNT NUMBER	CREDIT LIMIT
	MONTHLY PAYMENT
DO YOU OWN REAL ESTATE?	IF YES, PLEASE INDICATE WHERE
	<u></u>
HAVE YOU EVER BEEN EVICTED?	IF YES, PLEASE EXPLAIN
HAVE YOU EVER REFUSED TO PAY REN	T WHEN DUE? IF YES, PLEASE
ARE THERE ANY CIRCUMSTANCES WHI	CH MAY INTERRUPT YOUR INCOME OR ABILITY TO PAY
RENT?	
HAVE YOU EVER BEEN CONVICTED OF	A FELONY? IF YES, EXPLAIN

I REPRESENT THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THIS APPLICATION WILL BECOME AN ATTACHMENT TO THE LEASE AGREEMENT.

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HAROLD SHACKELFORD OR JENNIFER C SHACKELFORD IS AUTHORIZED TO VERIFY THE RENTAL REFERENCES, CREDIT REFERENCES, PERSONAL REFERENCES AND EMPLOYMENT INFORMATION GIVEN IN THIS APPLICATION AND TO REQUEST A CREDIT CHECK

SHACKELFORD PROPERTIES REQUIRES A DEPOSIT TO ACCOMPANY THIS APPLICATION IN ORDER FOR THE PROPERTY TO BE HELD FOR THE APPLICANT. THE APPLICANT **UNDERSTANDS THAT HOLDING THIS PROPERTY CAN RESULT IN LOST REVENUE FOR SHACKELFORD PROPERTIES IF THIS APPLICATION IS DENIED DUE TO INCORRECT, INCOMPLETE OF FALSIFIED INFORMATION AND THE DEPOSIT WILL BE FORFEITED.** 

THE APPLICANT UNDERSTANDS THAT THE LANDLORD MAY PERFORM A CREDIT CHECK TO VERIFY THE APPLICANT'S CREDIT REFERENCES AND CREDIT HISTORY IN CONNECTION WITH THE PROCESSING OF THIS RENTAL APPLICATION.

PET – I UNDERSTAND THAT <b>NO PETS</b> ARE PERMITTED ON THIS PROPERTY AND I WILL NOT
BRING A PET ON THE PROPERTY OR ALLOW OTHERS TO BRING PETS ON THE PREMISES. I
UNDERSTAND THAT IF PETS ARE OVSERVED ON THE PROPERTY AT ANY TIME I WILL BE IN
VIOLATION OUR LEASE AGREEMENT AND MY DEPOSIT FORFIETED AND I WILL HAVE TO
VACATE THE PREMISES IMMEDIATELY. PLEASE INITIAL
Two forms of identification are required with this application on of which must be a picture ID.
Copy of last utility bill (electric and water) for present address.
Copy of current lease agreement
All landlords listed must own the property and you must have a valid lease listing you as a tenant. We will NOT accept family or friends as valid landlords in this application.
I HAVE READ THE ABOVE AND UNDERSTAND AND ACCEPT THE POLICIES STATED
PRINT NAME

SIGNATURE