

# RENTAL APPLICATION

Property address: \_\_\_\_\_

Applicant wants to move in (date): \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

SS#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Email Address: \_\_\_\_\_ MDHA Case Worker and contact #(if applicable): \_\_\_\_\_

Present Address(Include City, State, Zip): \_\_\_\_\_

How Long? \_\_\_\_\_ Current rent amount: \_\_\_\_\_

Current landlord's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Is it okay to contact current landlord?: \_\_\_\_\_

Reason for moving out: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Previous Address Move in date: \_\_\_\_\_ Previous Address Move out date: \_\_\_\_\_

Previous landlords Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Previous Rent Amount: \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_ Reason: \_\_\_\_\_

Have you ever filed for bankruptcy: \_\_\_\_\_ Dates filed: \_\_\_\_\_

Late Rent Payments: \_\_\_\_\_ How many times: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Length time employed by present employer: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Payment type (i.e.- salary, hourly, tips, commission): \_\_\_\_\_

Monthly wages: \_\_\_\_\_ Other Income: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Supervisor Phone Number: \_\_\_\_\_

Length time employed by previous employer: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Monthly wages: \_\_\_\_\_ Other Income: \_\_\_\_\_

Payment type (i.e.- salary, hourly, tips, commission): \_\_\_\_\_

Do you have pets? \_\_\_\_\_ How Many: \_\_\_\_\_ What kind: \_\_\_\_\_ Age(s): \_\_\_\_\_

Do any of the potential tenants smoke: \_\_\_\_\_

Have you or any member that intends to occupy the residence been convicted of a misdemeanor or felony? \_\_\_\_\_

If YES, please list name and explanation: \_\_\_\_\_

Is there anything negative on occupants credit/background check you want to comment on: \_\_\_\_\_

Credit History: (List Bank/Institution below) (List Balance on deposit or balance owed)

Checking Account: \_\_\_\_\_

Savings Account: \_\_\_\_\_

Credit Card: \_\_\_\_\_

Auto Loan: \_\_\_\_\_

Additional Debt: \_\_\_\_\_

Please list all adults and children that intend to occupy the residence along with ages:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

In case of Emergency: Contact Name: \_\_\_\_\_ Contact #: \_\_\_\_\_

Co-Applicant's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

SS#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Co-Applicant Email: \_\_\_\_\_

MDHA Case Worker and contact #(if applicable): \_\_\_\_\_

Present Address(Include City, State, Zip): \_\_\_\_\_

How Long?: \_\_\_\_\_ Current rent amount: \_\_\_\_\_

Is it okay to contact current landlord?: \_\_\_\_\_

Current landlord's name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Reason for moving out: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Previous Address Move in date: \_\_\_\_\_ Previous Address Move out date \_\_\_\_\_

Previous landlords name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Previous Rent Amount: \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_ Reason: \_\_\_\_\_

Have you ever filed for bankruptcy?: \_\_\_\_\_ Dates filed: \_\_\_\_\_

Late Rent Payments: \_\_\_\_\_ How many times: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Length time employed by present employer: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Payment type (i.e.- salary, hourly, tips, commission): \_\_\_\_\_

Monthly wages: \_\_\_\_\_ Other Income: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Supervisor Phone Number: \_\_\_\_\_

Length time employed by previous employer: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Monthly wages: \_\_\_\_\_ Other Income: \_\_\_\_\_

Payment type (i.e.- salary, hourly, tips, commission): \_\_\_\_\_

Do you have pets? \_\_\_\_\_ How Many: \_\_\_\_\_ What kind: \_\_\_\_\_

Do any of the potential tenants smoke: \_\_\_\_\_

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1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

In case of Emergency: Contact Name: \_\_\_\_\_ Contact #: \_\_\_\_\_

**Application fee is \$45 per adult applicant. Check or money orders are acceptable. Please make payable to The Twin Team. Cash will NOT be accepted.**

**Applications/fees can be mailed or dropped off Monday-Thursday 10:00 am to 5:00 pm at:**

**1107 Gartland Avenue  
Nashville, TN 37206**

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I hereby authorize Jeremy Bockman of Twin Team Properties/The Twin Team to submit the information I have given for verification. I further grant permission and give my consent for Jeremy Bockman, Twin Team Properties/The Twin Team, and/or Complete Screening to obtain my rental history, credit report, criminal history and employment verification (including salary). My signature below shall confirm this statement.

Applicant Name (Print): \_\_\_\_\_  
Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Name (Print): \_\_\_\_\_  
Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Name (Print): \_\_\_\_\_  
Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name:

<u>Income</u>	Monthly
Salary	
Spouse Salary	
Bonus	
Other	
Other	
<b>Total Income</b>	

<u>Expenses</u>	Monthly
Rent	
<b>Utilities</b>	
Electric	
Gas	
Water	
Trash	
Cable	
Cell Phone	
Landline phone	
<b>Insurance</b>	
Homeowners	
Rental	
Auto	
Medical	
Dental	
Vision	
<b>Loans</b>	
Auto	
Home	
Student	
Personal	
Savings	
Subscriptions	
taxes	
Retirement	
Travel / Vacation	
Dining	
Entertainment / Recreation	
Beauty / Hair	
Auto Fuel expense	
Food	
Clothing	
Childcare	
Car maintenance	
<b>Total Expenses</b>	