

**Jim Henry & Associates**  
**Property Management**  
**410 N. Kentucky St. - Kingston, TN 37763**  
**Office (865) 376-2121 - Fax (865)376-0878**

**RENTAL APPLICATION**

Today's Date \_\_\_\_\_

Property: \_\_\_\_\_ Move-In Date: \_\_\_\_\_  
 Monthly Rental: \$ \_\_\_\_\_ Term: \_\_\_ One Year, \_\_\_ 6 Months, \_\_\_ other: \_\_\_\_\_  
 How did you here about us? \_\_\_\_\_

Do you have pets: \_\_\_ Yes \_\_\_ No      Size/Type: \_\_\_\_\_      Inside or Outside: \_\_\_\_\_

**PERSONAL INFORMANTION:**

Are you a smoker: \_\_\_ Yes \_\_\_ No

**APPLICANT'S NAME:** \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

DOB: \_\_\_\_\_ Email: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

**CO-APPLICANT:** \_\_\_\_\_ Are you a smoker: \_\_\_ Yes \_\_\_ No

Social Security #: \_\_\_\_\_ Phone Number: \_\_\_\_\_

DOB: \_\_\_\_\_ Email: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

**OTHERS WHO WILL OCCUPY THE HOME:**

Name \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship \_\_\_\_\_

**EMPLOYMENT:**

**APPLICANT'S EMPLOYER:** \_\_\_\_\_ How Long? \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Per Week \_\_\_ Per Month Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PREVIOUS EMPLOYER** (if less than 1 year) \_\_\_\_\_ How Long? \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Per Week \_\_\_ Per Month Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

**CO-APPLICANT EMPLOYER:** \_\_\_\_\_ How Long? \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Per Week \_\_\_ Per Month Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PREVIOUS EMPLOYER** (if less than 1 year) \_\_\_\_\_ How Long? \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Per Week \_\_\_ Per Month Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

**RESIDENT INFORMATION:**

**PRESENT ADDRESS:** \_\_\_\_\_ How Long? \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Present Landlord: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PREVIOUS ADDRESS:** \_\_\_\_\_ How Long? \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Present Landlord: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PERSONAL REFERENCES:**

List 3 persons, OTHER THAN YOUR RELATIVES, that we may contact to verify your character.)

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**VEHICLE INFORMATION:**

#1 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

License Number: \_\_\_\_\_ State where Licensed: \_\_\_\_\_

#2 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

License Number: \_\_\_\_\_ State where Licensed: \_\_\_\_\_

**IN CASE OF ILLNESS, ACCIDENT, EMERGENCY, PLEASE NOTIFY:**

Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

**APPLICATION PROCESSING FEE**

It is understood and agreed that a Non-Refundable processing charge of \$ 30.00 for single applicant or \$50.00 for two (2) or more applicants, payable with this application.

**AGENCY DISCLOSURE STATEMENT**

I acknowledge that Coldwell Banker Jim Henry & Associates, disclosed that they are representing the Lessor in the rental of house/apartment/business/ located at \_\_\_\_\_ on (date) \_\_\_\_\_ which was prior to the preparation of the lease agreement.

*By signing, the applicant(s) gives permission for the Landlord or agent to investigate the information supplied on this application and a full disclosure of pertinent facts may be made to the Landlord. Applicant understands that approval process will include a review of credit history and possible criminal background check. Furthermore, the undersigned declares that the information provided on this application is true and correct and false statements or information may result in the rejection of this and future applications for housing managed by Coldwell Banker Jim Henry & Associates Management.*

**I have read and I fully understand the terms and conditions set forth in the application.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ Date: \_\_\_\_\_