

Rental Application * **\$0 Non Refundable Fee**

Unit : No. 210

Date Needed: _____

OFFICE: Tennessee Boat Line * 445 W. Blount Ave., No. 216 * Knoxville, TN 37920 * 865-659-6742

PERSONAL INFORMATION

Full Name: _____ Cell Phone #: _____

Social Security #: _____ Date of Birth: _____ Email: _____

Spouse Full Name: _____ Cell Phone #: _____

Social Security # _____ Date of Birth: _____ Email: _____

Number of Dependents under age of 18: _____ Do you own Pets? _____

List Dependents: _____ List Pets: _____

RESIDENCE HISTORY

Current Address: _____ Length of time at current address: _____

Landlord's name & telephone #: _____ Monthly Rent: _____

Reason for moving: _____

Previous Address: _____ Length of time at previous address: _____

Landlord's name & telephone #: _____ Monthly Rent: _____

Reason for Moving: _____

EMPLOYMENT INFORMATION

All Students must have a Rental Responsibility Form signed by a Parent or Guardian

Your Status: Employed Full Time Employed Part Time Student Retired Self Employed Unemployed

If self employed, please furnish proof of income by submitting last two months bank statements and your most current tax return.

Your Employer: _____ Employer Telephone #: _____

Employer Address: _____

Position Held: _____ Supervisor: _____

Salary: _____ Per: _____ Length of Employment: _____

Spouse Status: Employed Full Time Employed Part Time Student Retired Self Employed Unemployed

Spouse Employer: _____ Employer Telephone #: _____

Employer Address: _____

Position Held: _____ Supervisor: _____

Salary: _____ Per: _____ Length of Employment: _____

BANKING REFERENCES

Bank	City, State	Telephone #	Type of Account	Account #
1.				
2.				
3.				

MONTHLY OBLIGATIONS

(List all monthly payments you are currently obligated to – include creditor name & monthly amount)

1.	Amount:	2.	Amount:
3.	Amount:	4.	Amount:
5.	Amount:	6.	Amount:
7.	Amount:	8.	Amount:
9.	Amount:	10.	Amount:

OTHER INFORMATION

Your Driver's License #: _____ State: _____ Expires: _____

Spouse Driver's License #: _____ State: _____ Expires: _____

Have you or your spouse ever:

Filed for Bankruptcy?
Had accounts sent for collection?
Willfully or intentionally refused to pay rent when due?

Yes	No
Yes	No
Yes	No

Been evicted from Tenancy?

Yes	No
Yes	No

Been convicted of a crime?

If Yes to any of the above, please explain below:

If Management has any questions about this application, please give phone numbers where you can be located.

Daytime: _____ **Evening:** _____

I have read and fully understand the terms and conditions set forth in this application and recognize this application is subject to acceptance or rejection. I hereby state that the information set forth above is true and complete and authorize Tennessee Boat Line to make any necessary investigations or inquiries as to the contents that is contained in this application. I understand that this investigation may include, but is not limited to, a credit report, verification of employment and salary, past rental history and criminal history. It is understood that any misrepresentation and/or omission is cause for Tennessee Boat Line to reject this application and to retain any deposits made as compensation for holding the property off of the market. I understand that I have the right to make a written request, within thirty (30) days of this application, to receive additional, detailed information about the nature and scope of this investigation.

If application is accepted, lease is to be executed within five (5) business days after applicant is notified of such acceptance. At this time, any deposit already made will be credited as part of the security deposit. If applicant is not accepted as a resident, any deposits already made will be returned to applicant within five (5) business days of such rejection except as otherwise noted.

If application is accepted and applicant does not sign lease within the above prescribed days after notification, the deposit will be forfeited as liquidated damages in payment for holding the property off of the market.

Signature of Applicant: _____ **Date Signed:** _____