1019 Summer Woo	1019 Summan Wead Boad Knowills TNL 27922			
Applicant's Full Name:				
Birth Date: Social S	ecurity Number	:		
Email Address:	Ce	Il Number:		
ARE YOU A UNITED STATES CITIZEN?	tion. We will not be al	ble to accept this application with	nout this information)	
ADULT HOUSEMATES: (Everyone over 18 must fill out application and	be listed on lease agre	ement)		
Name:	Relationship	o:		
Name:	Relationship	o:		
CHILDREN:				
Name:	Age:	Relationship:		
Name:				
Name:				
CURRENT ADDRESS:				
Owner/Agent:	FIK	one Number:		
Previous Address:				
Move In Month/Year:	Move out	Month/Year:		
Owner/Agent:	Phor	ne Number:		
EMPLOYMENT INFORMATION: (FOR KNOXVILLE) Full time	Part Time _	Student	Retired	
CURRENT EMPLOYER:				
Company:		Date Employe	d:	
Position:	Your W	/ork Phone:		
Supervisor:	Supervisor's Phone:			
Employers Address:				
Salary: \$ per	Please i	nclude check stub with app	lication for verification	
If less than 6 months, give name & address of previous:				
Have vou ever: Filed bankruptcy . Been evicted for t				

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PETS: WILL YOU BE BRIN	NGING A PET?	If Yes, How ma	ny:	
Type of pet:	Breed / Color / Weight:			
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All pets are subject to manager's approv	al and must be spayed or neutered.	We do have some breed restrictions.	I understand that there is a \$300 pet fee per animal.	This is

All pets are subject to manager's approval and must be spayed or neutered. We do have some breed restrictions. **I understand that there is a \$300 pet fee per animal.** This is to be paid on the day that I move in and is non-refundable. If I do not have an animal upon move-in but decide to get an animal once I am a resident, I will pay the \$300 pet fee before bringing the animal into the home. I also understand that some homes cannot have pets.

VEHICLE INFORMATION:

Your Driver's License Number: #		Verified:
How many vehicles will you have while		Please list all below:
Vehicle Make/Model/Color:	PI	ate#: State:
Vehicle Make/Model/Color:	PI	ate#: State:
Emergency Contact:	Phone:	Relationship:
EMERGENCY CONTACT:	Phone:	Relationship:
Please tell us how you first heard of I hereby give a \$ deposit and a \$ application is not accepted. Upon acceptance lease the home after a 72-hour period has statements above are true and correct, and I	administration fee as of this application, this money s as expired, the earnest mone hereby authorize verification of r	s earnest money to be refunded to me if the searnest money to be refunded to me if the shall be retained. If applicant does not ey is not refundable. I declare that the references given and a credit check. Any
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Office	use only	<u>/:</u>				
Leasing	Agent: _			Date Leased: _		
Applica	tion:	Approve	d Declined	Ву:	C	Date:
	If Appro	ved:	Resident Contacted:		Date:	_
	If Declin	ed:	Resident Contacted:		Letter Sent:	