

Riverside Manor Apartments

160 Manor Way

Louisville, Tennessee 37777

(865) 970-2267 Fax: (865) 977-8408

www.riversidemanorapts.com

Rental Application

Application Fee Paid: _____

Review Status: _____

Parking Permit No.: _____

Type/Size of Apartment Wanted _____ Date Wanted _____

Applicant's Full Name _____ Date of Birth _____

Current Address _____

City _____ State _____ Zip _____

Current Telephone Number(s) _____ Amount of Rent/Mortgage _____

Current Landlord / Apartment Complex _____ Phone Number _____

How long have you lived at current address? _____ Reason for moving _____

PREVIOUS ADDRESS _____

Previous Landlord / Apartment Complex _____ Phone Number _____

How long did you live at previous address? _____ Amount of Rent _____

EMPLOYED BY _____ How long? _____

Employer's Address _____ Phone Number _____

Position/Title _____ SSN _____

List of other persons (co-residents) to be living in apartment with you:

Name	SSN (Age 18 & up)	Date of Birth	Employment
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have pets? _____ **NO PETS ALLOWED!!** Household Income \$ _____ per _____

Automobile _____ Year _____ Color _____ Tag No. _____ State _____

Automobile _____ Year _____ Color _____ Tag No. _____ State _____

Driver's License Number _____ State _____

Emergency Contact Info: (Do not include persons living with you. At least one contact must be a family member.)

Contact (1): _____ Relationship _____

Address _____ Telephone _____

Contact (2): _____ Relationship _____

Address _____ Telephone _____

How did you find out about us? ___ Newspaper ___ Friend ___ Internet ___ Phone Book ___ Apartment Finder

___ Other, please list _____

I hereby make application for an apartment and certify that the above information is correct. I authorize you to obtain criminal and credit reports on myself and/or the above listed co-residents. I understand that the sexual offender registry will be checked. I also authorize you to contact any references, employers, and/or landlords, as listed above or that may appear on the credit report.

Applicant's Signature _____

Date _____

COPY OF DRIVER'S LICENSE IS REQUIRED.

Consent Form Disclosure of Information

Riverside Manor Apartments
160 Manor Way
Louisville, TN 37777
(865) 970-2267 Office · (865) 977-8408 Fax

A separate form must be completed for each household member over the age of 18.

Applicant Name: _____ Home Phone #: _____

Social Security No.: _____ Date of Birth: _____

Current Address: _____

Previous Address: _____

I hereby give consent to Management of the above-named apartment community to obtain an investigative consumer report and to access any records pertaining to me, which may be on file at any:

- | | |
|-------------------------------|---|
| Credit Agency | State or Local Agency |
| Law Enforcement Agency | State or Local Repository |
| City, State, or Federal Court | Information Service Bureau |
| | State or Local Sexual Offender Registry |

I do understand that the investigation will include information from law enforcement agencies, credit reporting agencies, and other documents of public records, and that these reports will be used in making decisions about my potential tenancy. I hereby authorize any agency contacted to furnish any and all information required. This releases the aforesaid parties from any liability and responsibility for providing the above information at any time.

I further understand that this report will be not be used in violation of any Federal or State Equal Opportunity Law or Regulation.

Signature of Applicant:

Date:
