

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 _____ When are funds available? _____

APPLICANT'S FULL NAME _____ Date of Birth _____

CURRENT ADDRESS _____

City _____ State _____ Zip _____

Current Telephone Number(s) _____ Amount of Rent _____

Current Landlord / Apartment Complex _____ Current Landlord phone number _____

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

PREVIOUS ADDRESS _____

Previous Landlord / Apartment Complex _____ Previous Landlord phone number _____

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

EMPLOYED BY _____ How Long? _____

Employer's Address _____ Telephone _____

Your position _____ Social Security Number _____

List of all persons to be living in apartment :

Name	Social Security No. (Adults)	Date of Birth	Employment	Individual Income/Month
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Do you have any pets? _____ **PETS ARE NOT ALLOWED !!** Total monthly household income \$ _____

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 hear about us? __Newspaper, __Friend, __Internet, __Phone Book, __Apt 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 _____

COPY OF DRIVER'S LICENSE IS REQUIRED.

Date _____

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 also authorize the apartment community to contact any references, employers, and/or landlords that may appear on my credit report or may be found to be relevant during the application investigation and review process.

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: _____