

# Residential Lease Application

Applicant's Name \_\_\_\_\_ Phone # \_\_\_\_\_ SSN \_\_\_\_\_ DOB \_\_\_\_\_

Driver's License # \_\_\_\_\_ Applicant: Smoker: Y N

Co-Applicant's Name \_\_\_\_\_ Phone# \_\_\_\_\_ SSN \_\_\_\_\_ DOB \_\_\_\_\_

Spouse DL# \_\_\_\_\_ Maiden Name \_\_\_\_\_ Co-Applicant: Smoker: Y N

Applicant's Email \_\_\_\_\_ Co-Applicant's Email \_\_\_\_\_

Name and age of anyone else who will occupy the unit and relationship to applicant:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Do you plan to run a business in the residence? Yes ( ) No ( ) If yes, what type? \_\_\_\_\_

Does applicant/co-applicant have an arrest record? Yes ( ) No ( ) if Y, please explain \_\_\_\_\_

## Vehicles

1. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Tag # \_\_\_\_\_ State \_\_\_\_\_
2. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Tag # \_\_\_\_\_ State \_\_\_\_\_

Do you have any pets? Yes ( ) No ( ) If yes, photos of pets are required

- Type \_\_\_\_\_ Weight \_\_\_\_\_ Color \_\_\_\_\_ Age \_\_\_\_\_
- Type \_\_\_\_\_ Weight \_\_\_\_\_ Color \_\_\_\_\_ Age \_\_\_\_\_

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

How Long \_\_\_\_\_ Reason for moving \_\_\_\_\_

Landlord's Name \_\_\_\_\_ Name of apartments \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Landlord's Phone/Fax/Email \_\_\_\_\_ Rent amount \_\_\_\_\_

*If less than 2 years at current address, please provide previous landlord information*

Landlord's Name \_\_\_\_\_ Name of apartments \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Landlord's Phone/Fax/Email \_\_\_\_\_ Rent Amount \_\_\_\_\_



217 Jamestown Park Road  
Suite 6  
Brentwood, TN 37027  
615.727.1150  
www.ASMProp.com

**Applicant's** Employer \_\_\_\_\_ Supervisor \_\_\_\_\_ Start Date \_\_\_\_\_

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

Phone # \_\_\_\_\_ Position \_\_\_\_\_

Salary \$ \_\_\_\_\_ hour ( ) week ( ) month ( ) annual ( )

*If less than 2 years at current employer, please provide previous employment information*

**Previous** Employer \_\_\_\_\_ Supervisor \_\_\_\_\_ Start Date \_\_\_\_\_

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

Phone # \_\_\_\_\_ Position \_\_\_\_\_

Salary \$ \_\_\_\_\_ hour ( ) week ( ) month ( ) annual ( )

**Co-Applicant's** Employer \_\_\_\_\_ Supervisor \_\_\_\_\_ Start Date \_\_\_\_\_

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

Phone # \_\_\_\_\_ Position \_\_\_\_\_

Salary \$ \_\_\_\_\_ hour ( ) week ( ) month ( ) annual ( )

*If less than 2 years at current employer, please provide previous employment information*

**Previous** Employer \_\_\_\_\_ Supervisor \_\_\_\_\_

Start Date \_\_\_\_\_

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

Phone # \_\_\_\_\_ Position \_\_\_\_\_

Salary \$ \_\_\_\_\_ hour ( ) week ( ) month ( ) annual ( )

Name of Bank \_\_\_\_\_ Address \_\_\_\_\_

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

Checking account # \_\_\_\_\_

Savings Account # \_\_\_\_\_

Credit References (local references preferred)

1. \_\_\_\_\_ Acct. # \_\_\_\_\_ Phone # \_\_\_\_\_

2. \_\_\_\_\_ Acct. # \_\_\_\_\_ Phone # \_\_\_\_\_

Character References

1. \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

2. \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_



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**A non-refundable application fee is due with this application in the amount of \$\_\_\_\_\_.  
\$50 for individual or married couple, \$25 for each additional co-applicant.**

1. The applicant understands that the application fee will not be refunded under any circumstance or applied to any monies due to the Lessor.
2. If applicant fails to fulfill these conditions, this application will be deemed to have been withdrawn and Lessor or applicant will be under no further obligation. However, if applicant merely changes his/her mind about the unit after the application has been processed and approved and security deposit has been paid, the security deposit will be retained by the Lessor as liquidated damages.
3. All applicable utilities will be furnished by the resident.
4. Applicant understands that the giving of false information or tendering of a bad check may cause the Lessor's option to breach and void any subsequent lease.
5. Notice in writing may be mailed to resident at leased premises or delivered to resident in person.
6. Lessor's failure to deliver possession of premises at the time agreed upon, shall not subject Lessor to damages in any amount.
7. I understand that this application is a part of my lease agreement. Also that as a part of normal procedure for processing this application an investigative consumer report may be obtained whereby information is secured through interviews with persons whom I am acquainted. This report, if obtained, typically contains information as to character, general reputation, personal characteristics and mode of living. I have the right to make a written request within a reasonable amount of time for a complete and accurate disclosure of additional information concerning the nature and scope of this report. I understand that I may obtain this information by writing directly to ASM Properties, LLC.

\_\_\_\_\_ **I have read the seven points above and understand ASM Properties rental application procedures.**

Applicant's Signature \_\_\_\_\_ Co-Applicant's Signature \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

\*\*\* APPLICATIONS WILL NOT BE PROCESSED WITHOUT A SIGNATURE! \*\*\*

**See back side for Rental Policy**



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## RENTAL POLICY

THE FOLLOWING POLICIES ARE ESTABLISHED TO ENSURE THAT ALL PROSPECTIVE APPLICANTS FOR A PROPERTY PROCESSED BY ASM Properties, LLC, WILL BE TREATED EQUALLY.

Please read the following rental policy and INITIAL BY EACH SECTION THAT YOU HAVE READ, to acknowledge that you understand ASM Properties' rental policy.

If you feel you meet the guidelines for qualifying, we encourage you to submit an application.

Only one application, per property, will be processed at a time. In order for an application to be processed, it must be filled out completely and signed by all applicants. Applications will be processed in the order received if accompanied by a security deposit. The security deposit will hold the Property for up to two weeks upon approval. Be advised that we will continue to market the property until the security deposit is submitted.

### APPLICANTS

1. Each person 18 years of age or older, who will reside in the property, (including dependent children or family members) must complete and sign an individual application. Application fees are \$50.00 for the first applicant and \$25.00 for each additional applicant.
2. Married applicants may submit one application and pay the application fee of \$50.00.
3. If a co-signer is necessary, the co-signer must also complete and sign an application, and pay the application fee. The acceptance of a co-signer is not normal policy and is subject to individual approval or denial by ASM Properties.
4. All application fees must accompany the application in certified funds (cash, cashier's check, money order), or by credit card, in order for it to be processed. Application fees are nonrefundable. Applications will not be processed until the application fee has been paid.

### CREDIT CRITERIA

1. ASM Properties will obtain a credit report for each applicant and co-signer 18 years of age or older. Reports supplied by applicants will not be accepted.
2. ASM Properties will not approve applicants who have filed bankruptcy, and bankruptcy has not been discharged or dismissed.
3. If you have a judgment from a previous landlord, your application will not be approved.
4. ASM Properties requires a credit score of 600. ASM Properties reserves the right to approve an applicant who has a credit score below 600, but will do so only with a higher security deposit.

### INCOME CRITERIA

1. Monthly recurring debt payments including rent must be less than 50% of household gross income.
2. If employed, we will need name and number of your human resources department for income verification. We do not pay for verifications. If your company uses a pay service for employment verification, you will need to submit a copy of your last year's W-2's and two (2) most recent pay stubs.
3. If self-employed, you will need to submit a copy of your last two (2) years of income tax returns and documentation of the current year (P&L, receipts, etc.).
4. Unverifiable income will NOT be considered.

### CONDITION OF MOVE-IN

1. All rental property will be rented as is. Requests for cosmetic repairs after move-in will not be considered.
2. All utility accounts, where applicable, must be transferred into the residents' name as of the date of possession.  
\*\*Utility verifications from the applicable utility companies must be in our office prior to signing the lease.\*\*
3. The security deposit and first month's rent are required at time of lease signing. Regardless of the day of the month your move in date is, one total month rent is due. Prorated rent, if applicable, will be due on the first day of the following month. **We will only accept certified funds (cash, cashier's check, money order) for the deposit and the first month's rent.**
4. We do not spray for insects/pests other than termites.
5. Hours for lease signings are Monday through Friday, 9:00 A.M. through 4:00 P.M., and Saturday by appointment only.
6. A copy of a photo ID, (Driver's License, Military ID, etc.) must be presented at time of lease signing.
7. If the property you are applying for accepts pets, there is a non-refundable \$300 pet fee that must be paid at the lease signing. There is a \$100 charge for each additional pet. Please note, this is a pet FEE and not a pet DEPOSIT. You will be required to sign a pet addendum along with the lease. Tenants are responsible for any damage caused by their pets.

**If you have any questions, please feel free to call us at (615) 727-1150.**



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## CONSUMER CREDIT REPORT RELEASE AND AUTHORIZATION V.2015

The purpose of this form is to notify you that a Consumer Credit Report will be conducted on you in the course of consideration for Tenant Screening. This report is being provided by CIC Mortgage Credit, Inc. 321 Caldwell Dr. Ste. 100 Goodlettsville, TN 37072 Phone 800-352-5882.

I hereby authorize any agent of your company to obtain a copy of my credit report for FCRA Permissible Purpose of Tenant Screening. This release shall remain in effect for the length of my Rental agreement. I understand I have the right to obtain a free copy of this Consumer Report if; (1) Any adverse action/decision is made based on the information in the consumer report, & (2) If the request is made in writing within 60 days of the adverse action. I believe to the best of my knowledge that all information I have provided is accurate true and correct and that I fully understand the terms of this release.

**Please write clearly**

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

List any other name used in the last 7 years \_\_\_\_\_

Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_-\_\_\_\_-\_\_\_\_

Drivers License # \_\_\_\_\_ State \_\_\_\_\_ Sex \_\_\_\_\_

***List your current mailing address as well as any other cities or towns you have lived in the past 7 years:***

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I authorize CIC Credit to obtain and verify information relating to my credit background and create a report of its findings. I understand that CIC Credit will provide the information as it is reported in the applicable public records at the time of CIC Credit's request or at the time CIC Credit obtains the information from other credit reporting agencies, and therefore CIC Credit cannot and does not guaranty the accuracy of the information reported. Accordingly, I release and hold harmless CIC Credit and its agents from any liability related to the accuracy of that information, to the extent that CIC Credit accurately transcribed the information provided to it.

I further understand and waive my right of privacy in this investigation. I authorize the appropriate individuals, companies, institutions or agencies to release information to CIC Credit, and I release those entities, to the extent allowable by law, from any liability as a result of such inquiries or disclosures.

I have read and understand this disclosure and consent form. By checking the box at the end of this statement I am authorizing CIC Credit to conduct a credit check and certify that I am responsible for payment for all services requested.

I agree

Your Signature \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_