## Garland Management Company P.O. Box 10193 • Knoxville, Tennessee 37939

## RENTAL APPLICATION

www.garlandmanagement.com

Windy Phone: 865-982-9678 Fax: 888-280-1278 garlandmgmt3@att.net

Williamsburg Fax: 888-279-6809 Evergreen Village garlandmgmt@bellsouth.net Terrace

Evergreen Phone: 865-577-7066 Fax: 888-607-7903 garlandmgmt2@att.net

The undersigned hereby ma	ıkes application to rent u	nit number	located at			
beginning on	, at a monthly rental of \$					
PLEASE TELL US ABOU	JT YOURSELF					
FULL NAME			Phone (	)_		
Email:						
Date of Birth	Social Security N	0	Driver's Lic.	. No. & S	tate	
					ne ( )	
Date of Birth				. No. & S	tate	
Name of All Other Occupa	nts			1 0		
How Many Pets?	Kind of Pet. Breed				Occupants	
APPLICANT — PLEASE		The Contract of the Contract o	CONTRACTOR SOLVENSIA SOLVE			
CURRENT ADDRESS				, с		
			_		hly payment \$	
PREVIOUS ADDRESS (If wi						
Owner or Agent		Phone ( )		Mont	hly payment \$	
CO-APPLICANT – PLE	ASE GIVE YOUR RES	IDENCE HISTORY	FOR THE PAST	3 YEARS	(Beginning With Most Current)	
CURRENT ADDRESS						
			~		hly payment \$	
PREVIOUS ADDRESS (If wi						
					hly payment \$	
PLEASE GIVE YOUR E	MPLOYMENT INFOR	MATION				
APPLICANT STATUS:	ET CARL THE COMMENT OF SECURITIES OF THE PROPERTY OF THE PROPE	Employed Part-Time	□ Student □ 1	Retired	□ Not Employed	
CURRENT EMPLOYER (Or 1					1 3	
			PhP	none (	)	
					onthly Income \$	
PREVIOUS EMPLOYER (Or	Most Recent)					
PREVIOUS EMPLOYER (Or Address	z '		Pł	none (	)	
Supervisor	Your Gross	s Monthly Salary \$	Household	Gross M	onthly Income \$	
If there are other sources contact for confirmation.	s of income you would like us to You do NOT have to reveal alin	consider, please list income nony, child support or spous	e, source and person (Bank se's annual income unless	ker, Employe vou want us	er, etc.) who we could s to consider it in this application.	
		J 11 1		•	)	
PLEASE GIVE YOUR E						
CO-APPLICANT STATUS:				□ Retire	d D Not Employed	
CURRENT EMPLOYER (Or						
					)	
Date(s) Employed /	' From	То	Position		,	
					onthly Income \$	
PREVIOUS EMPLOYER (Or					•	
					)	
Supervisor	Your Gross	s Monthly Salary \$	Household	Gross M	onthly Income \$	
If there are other sources	s of income you would like us to	consider, please list income	e, source and person (Ban	ker, Employe	er, etc.) who we could s to consider it in this application.	
	Per			-	)	
			11		,	

	(including Company Vehicles)		N. /C	
			Tag No./State Tag No./State	
Other Car, Motorcycle, etc		Color la	g ino./state	
	ent?		ease? □ Yes □ No □ No	
•	convicted of a criminal offense?			
PLEASE LIST YOUR BANK	AND CREDIT REFERENCES			
APPLICANT BANK(S)	City-State/Branch	Acct. Number & type	Telephone	
CO-APPLICANT BANK(S)	City-State/Branch	Acct. Number & type	Telephone	
CREDIT REFERENCES	City-State	Acct. Number	Telephone	
1	· · · · · · · · · · · · · · · · · · ·			
2		**************************************		
f management has any question Day Phone ( )	operty?s about your application, please g Night Phone (	ive phone numbers where you )		
Full Address: Home Phone: ( )	MERGENCY, NOTIFY:	Work Phone: ( )		
Full Address:	MERGENCY, NOTIFY:			
accepted within busine When so approved and accepted balance of the cleaning fees and It is understood that Garland Ma that this deposit may be forfeited I AUTHORIZE YOU TO CONTA CATION. I ALSO AUTHORIZE N The above information, to the be	as earnest money to holes banking days. Upon acceptance of the large to execute a lease for (6) Seall rent due at the signing of the lease. In agement Company can hold an apart of the lease is not executed and all more company can be large. CT PREVIOUS LANDLORD(S), CREDIT MANAGEMENT TO OBTAIN MY CONSTRUCTS of my knowledge, is true and correct set of my knowledge, is true and correct	nis application, this deposit shall be not six  (12) Twelve months before the months before the month of the applicant no longer that the side are paid.  AND PERSONAL REFERENCES THE SUMER CREDIT REPORT AND CRID.	retained as part of the cleaning fees. e possession is given and to pay the n the end of the current month and HAT I HAVE GIVEN IN THIS APPLI-	
Signature of Applicant			Date Signed / /	
Signature of Co-Applicant	A DDI I CANIMA DI BAGRADA		Date Signed / /	
	RECEIVED BY (NAME) EIVED BY (NAME)		The state of the s	
Reference Verification Nar			DATE	
Comments:				
THIS APPLICATION:   APPR		;		
TO S I	Title		Date	
	and the state of t			
BY	and the state of t		Date Notified	