



P.O. Box 11009 • Murfreesboro, TN. 37129

(615) 848-0023 • Fax (615) 848-7908

Applegate • Gateway • Dana Downs

www.throneberryapartments.com

RENTAL APPLICATION

\$25 Non-Refundable Application Fee Required

Date: _____ Complex/Apt # _____ Move In Special: _____

OFFICE USE ONLY

<u>Funds Collected</u>	<u>Date Paid</u>	<u>Funds Collected</u>	<u>\$</u>	<u>Date Paid</u>	
Application Fee	\$ _____	Pro-Rate Rent	\$ _____	_____	Rent per month _____
Reservation Fee	\$ _____	Monthly Rent	\$ _____	_____	Lease Term _____
Pet Fee	\$ _____	Last Months Rent	\$ _____	_____	Date Rent Starts _____

**Occupancy limit: 1 Bedroom 2 people • 2 Bedroom 2 adults or 4 people total • 3 Bedroom 3 Adults or 5 people

How did you hear about us? _____ Newspaper _____ Yellow Pages _____ Apartments Guide/Magazine
 _____ Current or Prior Resident _____ Internet _____ Drive By

The Reservation Fee is to guarantee that the applicant proceeds with lease agreement and leases the apartment. If, for any reason applicant fails or refuses to proceed with the lease agreement and fails or refuses to lease the apartment, applicant forfeits any and all fees paid. Apartments can only be held with approved application and Reservation fee. *Last Months Rent: Can be a solution for any applicant not meeting all the criteria for residency. Applicants signature on page 2 acknowledges above conditions and requirements.

PERSONAL INFORMATION

Applicants Name _____ SSN # _____
 Birthday _____ Married _____ Single _____ Divorced _____ Separated Spouse's Name _____
 Spouse's SSN # _____ Maiden Name _____ Birthday _____

List all other residents	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

Roommates: Last Months Rent (LMR) is required for all roommates

RESIDENCE HISTORY

Present Address _____
 Street City Zip Code

Telephone # _____ How long _____ Monthly Payment or Rent \$ _____
 Reason for moving _____ Landlord's Name _____
 Landlord's Address _____ Telephone # _____
 Above address is: _____ House _____ Duplex _____ Apartment _____ Condo _____ Other _____
 Former Address _____
 How Long _____ Reason for moving _____ Landlord's Name _____
 Landlord's Address _____ Telephone # _____

EMPLOYMENT HISTORY

Applicants Employer _____ Supervisor _____
 Address _____
 Telephone # _____ Full-Time _____ Part-Time _____ Position Held _____ Date Hired _____
 Income \$ _____ Hour: _____ Week: _____ Month: _____ Full-Time _____ Part-Time _____
 Former Employer _____ Supervisor _____
 Address _____
 Telephone# _____ Date Hired _____

Spouse's Employer _____ Supervisor _____

Address _____

Telephone # _____ Full-Time _____ Part-Time _____ Position Held _____ Date Hired _____

Income \$ _____ Hour: _____ Week: _____ Month: _____ Full-Time _____ Part-Time _____

If Student: School Attending _____ Address _____

Present grade level _____ Expected Graduation Date _____ Full-Time _____ Part-Time _____

Source of Income _____

Pet(s): Number _____ Type(s) _____ Weight _____ Age _____ How Long Owned _____

Color(s) _____ House Broken _____ Yes _____ No *Limit of 2 pets per apartment*

You are required to declare at move-in if you are bringing a pet with you and pay a pet fee of \$350-\$500

***limit one pet at Dana Downs location.*

BANKING AND CREDIT REFERENCES

Name of Bank _____ Branch _____

Address _____ Person to Contact _____

Phone # _____

Has applicant, spouse, or any other proposed resident ever?

Been evicted from tenancy? _____ Yes _____ No

Filed for Bankruptcy? _____ Yes _____ No

Been Convicted of a Felony? _____ Yes _____ No

Lived at Throneberry Apartments? _____ Yes _____ No

Credit References (local preferred)

1. _____ Phone # _____

2. _____ Phone # _____

3. _____ Phone # _____

Character References:

1. _____ Address _____

_____ Phone # _____

2. _____ Address _____

_____ Phone # _____

Applicants Parents: _____

Address _____ Phone # _____

Spouse's Parents: _____

Address _____ Phone # _____

Vehicles: Only vehicles listed on your application, properly registered, licensed and operational, are to be parked on the premises.

Vehicles not allowed may be towed at owner's expense.

1. Year/Make/Model _____ Color _____ Tag # _____ County _____ State _____

2. Year/Make/Model _____ Color _____ Tag # _____ County _____ State _____

Drivers License #: Applicant _____ Spouse _____ State _____

In Case of illness or emergency, please notify:

Name _____ Relationship _____ Phone # _____

Address: _____

Street

City

State

Zip Code

Applicant authorizes **CSI** to make any necessary investigations as to the contents that are contained in this application. I understand that this investigation may include, but not limited to, a credit report, verification of employment, past rental history and police records. I therefore, consent to this investigation, and certify that all stated facts are true, and it is understood that any misrepresentation or omission is cause for the management and/or owners to reject this application and or terminate lease.

(Important notice) It is also understood and agreed that the security fee is a non refundable fee. **Throneberry Apartments,LLC**

does business in accordance with the Federal Fair Housing Law, and does not discriminate against any persons, because of race, color, religion, sex, handicap, familial status, or national origin.

Applicants Signature _____ Date _____

Co-Applicants Signature _____ Date _____

