

Rental Application for Residents and Occupants

*Each co-applicant and each occupant 18 years old and over must submit a separate application.
Spouses may submit a single application.*



Date when filled out: _____

ABOUT YOU Full name (exactly as on driver's license or govt. ID card) _____

Your street address (as shown on your driver's license or government ID card): _____

Driver's license # and state: _____
OR govt. photo ID card #: _____

Former last names (maiden and married): _____

Your Social Security #: _____

Birthdate: _____ Height: _____ Weight: _____

Sex: _____ Eye color: _____ Hair color: _____

Marital Status: single married divorced widowed separated

Are you a U.S. citizen? Yes No Do you or any occupant smoke? yes no

Will you or any occupant have an animal? yes no

Kind, weight, breed, age: _____

Current home address (where you now live): _____

City/State/Zip: _____

Home/cell phone: (____) _____ Current rent: \$ _____

Email address: _____

Name of apartment where you now live: _____

Current owner or manager's name: _____

Their phone: _____ Date moved in: _____

Why are you leaving your current residence? _____

Your previous home address: _____

City/State/Zip: _____

Apartment name: _____

Name of above owner or manager: _____

Their phone: _____ Previous monthly rent: \$ _____

Date you moved in: _____ Date you moved out: _____

YOUR WORK Present employer: _____

Address: _____

City/State/Zip: _____

Work phone: (____) _____

Position: _____

Your gross annual income is over: \$ _____

Date you began this job: _____

Supervisor's name and phone: _____

Previous employer: _____

Address: _____

City/State/Zip: _____

Work phone: (____) _____

Position: _____

Gross annual income was over: \$ _____

Dates you began and ended this job: _____

Previous supervisor's name and phone: _____

YOUR CREDIT HISTORY Your bank's name, city, state: _____

List major credit cards: _____

Other non-work income you want considered. Please explain: _____

Past credit problems you want to explain. (Use separate page.)

WHY YOU APPLIED HERE Were you referred? Yes No.
If yes, by whom:

Name of locator or rental agency: _____

Name of individual locator or agent: _____

Name of friend or other person: _____

Did you find us on your own? Yes No *If yes, fill in information below:*

On the Internet Stopped by Newspaper (name): _____

Rental publication: _____

Other: _____

YOUR RENTAL/CRIMINAL HISTORY Check only if applicable. Have you, your spouse, or any occupant listed in this Application ever: been evicted or asked to move out? moved out of a dwelling before the end of the lease term without the owner's consent? declared bankruptcy? been sued for rent? been sued for property damage? been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that was resolved by conviction, probation, deferred adjudication, court ordered community supervision, or pretrial diversion? been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that has not been resolved by any method? Please indicate below the year, location and type of each felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or sex crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before making a decision. *You represent the answer is "no" to any item not checked above.*

YOUR SPOUSE Full name: _____

Former last names (maiden and married): _____

Spouse's Social Security #: _____

Driver's license # and state: _____
OR govt. photo ID card #: _____

Birthdate: _____ Height: _____ Weight: _____

Sex: _____ Eye color: _____ Hair color: _____

Are you a U.S. citizen? Yes No

Present employer: _____

Address: _____

City/State/Zip: _____

Work phone: (____) _____

Position: _____

Date began job: _____ Gross annual income is over: \$ _____

Supervisor's name and phone: _____

OTHER OCCUPANTS Names of all persons under 18 and other adults who will occupy the unit without signing the lease. Continue on separate page if more than three.

Name: _____ Relationship: _____

Sex: _____ DL or govt. ID card # and state: _____

Birthdate: _____ Social Security #: _____

Name: _____ Relationship: _____

Sex: _____ DL or govt. ID card # and state: _____

Birthdate: _____ Social Security #: _____

Name: _____ Relationship: _____

Sex: _____ DL or govt. ID card # and state: _____

Birthdate: _____ Social Security #: _____

YOUR VEHICLES List all vehicles owned or operated by you, your spouse, or any occupants (including cars, trucks, motorcycles, trailers, etc.). Continue on separate page if more than three.

Make and color of vehicle: _____

Year: _____ License #: _____ State: _____

Make and color of vehicle: _____

Year: _____ License #: _____ State: _____

Make and color of vehicle: _____

Year: _____ License #: _____ State: _____

EMERGENCY Emergency contact person over 18, who will not be living with you:

Name: _____

Address: _____

City/State/Zip: _____

Work phone: (____) _____ Home phone: (____) _____

Relationship: _____

AUTHORIZATION I or we authorize (owner's name) _____

Williamson Farms Corp/ALARA Farms

to obtain reports from any consumer or criminal record reporting agencies before, during, and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application.

Applicant's signature _____

Spouse's signature _____

Applicant must also sign on the next page of this Application.

Contemplated Lease Contract Information

To be filled in only if the Lease Contract is not signed by resident(s) at time of application for rental.

The National Apartment Association Lease Contract to be used must be the latest version published by the association unless an earlier version is initialed by resident(s) and attached to this Application. The blanks in the Lease Contract will contain the following information:

- Names of all residents who will sign Lease Contract
Name of Owner/Lessor Williamson Farms Corp/ALARA Farms
Property name and type of dwelling
Complete street address 201 Gillespie Drive
City/State/Zip Franklin, TN 37067
Names of all other occupants not signing Lease Contract
Total number of residents and occupants
Beginning date and ending date of Lease Contract
Total security deposit \$; Animal deposit \$ 0.00
Other fees \$
Total monthly rent for dwelling unit \$

- Rent to be paid at (check one) on-site manager's office or at Rent Drop across mailroom
Prorated rent for: first month or second month \$
Monthly rental due date
Returned-check charge \$ 30.00
Utilities paid by owner (check all that apply): electricity, gas, water, wastewater, trash, cable TV, master TV antenna
You are (check one): required to purchase personal liability insurance or not required to purchase personal liability insurance
Agreed reletting charge \$
Special provisions regarding parking, storage, etc.:

Application Agreement

- 1. Lease Contract Information. The Lease Contract contemplated by the parties is attached or, if no Lease Contract is attached, the Lease Contract will be the current Lease Contract noted above.
2. Application Fee (nonrefundable). You have delivered to our representative an application fee in the amount indicated below, and this payment partially defrays the cost of administrative paperwork.
3. Application Deposit (may or may not be refundable). In addition to any application fee, you have delivered to our representative an application deposit in the amount indicated below.
4. Approval When Lease Contract Is Signed in Advance. If you and all co-applicants have already signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease Contract, and then credit the application deposit of all applicants toward the required security deposit.
5. Approval When Lease Contract Isn't Yet Signed. If you and all co-applicants have not signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease Contract when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit.
6. If You Fail to Sign Lease Contract After Approval. Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease Contract within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval.
7. If You Withdraw Before Approval. You and any co-applicant may not withdraw your application or the application deposit.

- 8. Completed Application. An Application will not be considered "completed" and will not be processed until all of the following have been provided to us (unless checked): a separate Application has been fully filled out and signed by you and each co-applicant; an application fee has been paid to us; an application deposit has been paid to us.
9. Non-approval. We will notify you whether you've been approved within 10 days after the date we receive a completed Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a completed Application.
10. Refund after Non-approval. If you or any co-applicant is disapproved or deemed disapproved under paragraph 9, we'll refund all application deposits within 30 days of such disapproval.
11. Extension of Deadlines. If the deadline for signing, approving, or re-funding under paragraphs 6, 9, or 10 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next day.
12. Notice to or from Co-applicants. Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.
13. Keys or Access Devices. We'll furnish keys and/or access devices only after: (1) all parties have signed the contemplated Lease Contract and other rental documents referred to in the Lease Contract; and (2) all applicable rents and security deposits have been paid in full.
14. Receipt. Application fee (nonrefundable): \$
Application deposit (may or may not be refundable): \$
Other move-in fees (may or may not be refundable): \$
Total of above application fee and application deposit: \$
Total amount of money we've received to this date: \$
15. Signature. Our representative's signature is consent only to this Application Agreement. It does not bind us to accept applicant or to sign the proposed Lease Contract.

Acknowledgment. You declare that all your statements on the first page of this Application are true and complete. You authorize us to verify same through any means. If you fail to answer any question or give false information, we may reject the application, retain all application fees and deposits as liquidated damages for our time and expense, and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits relating to the application or Lease Contract, the prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any time furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your legal obligations, including both favorable and unfavorable information about your compliance with the Lease Contract, the rules, and financial obligations.

If you're seriously ill or injured, what doctor may we notify? (We're not responsible for providing medical information to or calling doctors or emergency personnel.)
Doctor's name:
Doctor's phone: ()
Important medical information about you in an emergency:

Applicant's Signature: Date:
Signature of Spouse: Date:
Signature of Owner's Representative: Date:

FOR OFFICE USE ONLY
1. Apt. name or dwelling address (street, city) Williamson Farms Corp/ALARA Farms
2. Person accepting application:
3. Person processing application:
4. Date that applicant or co-applicant was notified by telephone, letter, or in person of acceptance or nonacceptance:
5. Name of person(s) who were notified (at least one applicant must be notified if multiple applicants):
6. Name of owner's representative who notified above person(s):