

ARRINGTON RENTALS
140 Wallace Blvd. PO Box 20010
Clarksville, TN 37042
931-431-4200

APPLICATION INSTRUCTIONS AND APPLICATION

Initial(s) **Please read the following information carefully:**

___ ___ Application Fee of \$25.00 each person (unless married) is **NON-REFUNDABLE** and payable in **MONEY ORDER OR CASH ONLY** at lease signing.

___ ___ We may have floor plan or interior pictures of our rentals. Please visit our website www.arringtonrentals.com for more information. All rental units are rented on a first come, first served basis.

___ ___ A property you apply for may be rented before the completion of your application. It is very important that you provide us with a complete application before we process. **WE DO NOT PUT PROPERTIES ON HOLD WITHOUT A PROCESSED AND APPROVED APPLICATION WITH FULL DEPOSIT.**

___ ___ Please allow 24-48 hrs. for application processing. Once you are approved, you must immediately give us a deposit (equal to one month's rent) in full via money order, cashier's check or credit card (subject to a 4% merchant fee) only. **WE DO NOT ACCEPT CASH OR PERSONAL CHECKS FOR A DEPOSIT.** A lease must be completed within ten (10) days of approval.

___ ___ All move - in money is to be paid via cashier's check, money order or credit card (subject to a 4% merchant fee) only. Personal checks are not allowed. Move - in money is security deposit, first month's rent, application fee and pet deposit (if applicable) in separate funds.

___ ___ Please read and review the application carefully. If you think you will qualify, please complete it carefully and thoroughly and provide all required documentation. An incomplete application will not be processed.

Required Documentation for Application Processing:

Picture ID of all persons that will be occupying the rental i.e. applicant(s), occupants over 18 years of age, person(s) using power of attorney.

Verifiable Income - Current LES (military), six (6) months verifiable child support, check stubs within the last sixty (60) days from date of application, tax records for the self-employed.

Rental Verification - Provide full, up to date information from landlord(s) of the property(s) you have rented for the past two years.

Power of Attorney - A copy of an ACTIVE POA (if being used) must be received with the application.

Section 8 Voucher - A copy of your Section 8 Voucher must be received with the application. If you are approved, all other THDA/ KYHC documents will be requested.

*****ALL APPROVED APPLICATIONS HAVE A 30 DAY USE PERIOD. AFTER 30 DAYS A NEW APPLICATION MUST BE SUBMITTED*****

___ ___ Properties are held with a deposit only. Until a deposit is received, the property remains active on our website and on our rental list.

___ ___ **YOU WILL FOREFIT YOUR DEPOSIT IF YOU FAIL TO START A LEASE WITHIN 10 DAYS OF APPLICATION APPROVAL OR IF YOU SIMPLY CHANGE YOUR MIND. NO EXCEPTIONS.**

Once you are approved for a property, you have given a deposit and have signed a lease, there is NO EXCEPTION of any kind to have your deposit refunded or get out of the lease because the property is not what you expected. Please ask questions prior to any of these circumstances.

You will be notified via phone or email that you have been approved/ denied.

Leases are completed by appointment only between the hours of 8:00 am and 2:00 pm Monday through Friday ONLY (excluding Holidays).

After you have completed your lease, an Arrington Rentals representative will schedule a move - in inspection with you or your POA representative. Move - in inspections are conducted from 8:00 am - 2:00 pm Monday through Friday ONLY (excluding Holidays). Keys will only be released after the move - in inspection is complete with all signatures. **NO EXCEPTIONS!**

Our office hours are 8:00 am to 3:00 pm Monday through Friday (except Holidays). Applications are accepted and processed during office hours only

PRIMARY APPLICANT SIGNATURE

DATE

SECONDARY APPLICANT SIGNATURE

DATE

ARRINGTON RENTALS
140 Wallace Blvd. PO Box 20010
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931-431-4200

PROPERTY ADDRESS: _____ ZIPCODE _____

EXPECTED MOVE IN DATE: _____ RENT AMOUNT: _____

PRIMARY APPLICANT

PRIMARY APPLICANT NAME: _____ PHONE NUMBER: _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____

EMAIL ADDRESS: _____

CURRENT ADDRESS: _____ RENT OR OWN (circle one)

CITY/ STATE: _____ ZIPCODE: _____ HOW LONG: _____

LANDLORD: _____ RENT/ MORTGAGE AMT: _____

PHONE NUMBER: _____ FAX: _____

PREVIOUS ADDRESS: _____ ZIPCODE: _____

CITY/ STATE: _____ ZIPCODE: _____ HOW LONG: _____

LANDLORD: _____ RENT/ MORTGAGE AMT: _____

PHONE NUMBER: _____ FAX: _____

SECONDARY APPLICANT

SECONDARY APPLICANT NAME: _____ PHONE NUMBER: _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____

EMAIL ADDRESS: _____

CURRENT ADDRESS: _____ RENT OR OWN (circle one)

CITY/ STATE: _____ ZIPCODE: _____ HOW LONG: _____

LANDLORD: _____ RENT/ MORTGAGE AMT: _____

PHONE NUMBER: _____ FAX: _____

PREVIOUS ADDRESS: _____ ZIPCODE: _____

CITY/ STATE: _____ ZIPCODE: _____ HOW LONG: _____

LANDLORD: _____ RENT/ MORTGAGE AMT: _____

PHONE NUMBER: _____ FAX: _____

Agent: _____

Dependents/ other individuals who will be occupying rental with applicant:

| Name | Relationship to Applicant | Date of Birth |
|-------|---------------------------|---------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Do any of the applicants and/ or occupants above have a criminal or arrest record? YES or NO
(If yes, describe): _____

Reason for moving: _____

Employment Information

Military personnel must complete the following:

Unit: _____ Unit Phone Number: _____

Supervisor: _____ Phone Number: _____

Rank: _____ Years in Service: _____ Monthly Income: _____ BAH _____

Additional Income (child support, alimony, retirement, etc.) Yes or No How much: _____

Civilians must complete the following:

Primary Applicant Employer: _____

Address: _____ State/ Zip: _____

Phone: _____ Position: _____ Supervisor: _____

How Long: _____ Monthly income: _____

Additional Income (child support, alimony, retirement, etc.) Yes or No How much: _____

Civilians must complete the following:

Secondary Applicant Employer: _____

Address: _____ State/ Zip: _____

Phone: _____ Position: _____ Supervisor: _____

How Long: _____ Monthly income: _____

Additional Income (child support, alimony, retirement, etc.) Yes or No How much: _____

Total Household Monthly Income and Debt:

Gross Monthly Income: _____ Credit Cards: _____

Mil BAH: _____ Car Loan: _____

Mil BAS: _____ Mortgage: _____

Spousal Income: _____ Student Loan: _____

Additional Income: _____ Other Debt: _____

Has applicant(s) ever filed for bankruptcy? Yes or No Please provide names and details:

Is/are applicant(s) currently in bankruptcy: Yes or No

Does applicant(s) or any proposed resident have an arrest record: Yes or No Please provide details:

Vehicle(s): Year Make Model Color:

- 1. _____
- 2. _____
- 3. _____

Driver License Number and State Where Issued:

Primary Applicant: _____

Secondary Applicant: _____

Credit/ Personal References (NO RELATIVES):

- 1. _____ Phone: _____
- 2. _____ Phone: _____
- 3. _____ Phone: _____

Pets:

Type: _____ Breed: _____ Age: _____ Weight: _____

Description: _____

Name: _____

Type: _____ Breed: _____ Age: _____ Weight: _____

Description: _____

Name: _____

Emergency Contact (other than occupants of rental) and must be a relative:

Name: _____ Address: _____

Phone: _____ Relationship: _____

Initial all:

_____ If pets/ animals are allowed by management, a non-refundable pet fee of \$200.00 for the first and \$100 for each additional is payable upon execution of lease. Pets/ animals are subject to management approval. The fee(s) and written approval by Arrington Rentals must be obtained before any pets/ animals are allowed on the premises. This also applies to pet/ animal sitting at any time for any period of time.

_____ If you have given Arrington Rentals a deposit, a lease must be started within ten days of application approval. Deposit is forfeited if applicant changes their mind and or/ a lease is not started. A non refundable application fee of \$25.00 is due at lease signing appointment.

_____ Applicant(s) have examined the premises and agree to take possession in the present condition without alterations or repairs except noted on the move – in inspection.

_____ Leases are by appointment only and you will be called to schedule an appointment. Date of lease occupancy if subject to the determination of premises condition.

_____ Upon completion of lease and before you receive keys, a move – in inspection will be conducted by an Arrington Rental representative and you must be present. All utilities must be on in tenant name at inspection time and tenant must be present. A \$25.00 reschedule fee payable at inspection time will be imposed if tenant(s) are not present at initial inspection time. Keys will only be given after inspection is completed. NO EXCEPTIONS!

RELEASE OF INFORMATION TO ARRINGTON RENTALS AND AUTHORIZATION TO OBTAIN CREDIT REPORT:

Please read before signing:

The information I/ we have provided on the Arrington Rentals application is correct. I/ we authorize confirmation of all information that I/ we have provided and I/ we authorize Arrington Rentals to obtain a credit report. Arrington Rentals may contact any person or company that I/ we have listed on the Arrington Rentals application and I/ we fully release all parties from all liability for any damage the may result. My/ our signature(s) below indicate that for purpose of confirmation, I/ we have voluntarily waived the protection of all rights to privacy laws. This rental application may be rejected if any information provided is found to be false.

I AM APPLYING FOR A LEASE AND I AM OVER EIGHTEEN (18) YEARS OF AGE.

SIGNATURE – PRIMARY APPLICANT

DATE

SIGNATURE – SECONDARY APPLICANT

DATE

Procuring Agent Name:
Email: arringtonrentals@cdelightband.net

Phone:
Company/ Branch: **ARRINGTON RENTALS**