



806 E. Jackson Blvd., Suites 5 & 6
Jonesborough, TN 37659

Rental Verification Form

To be completed and signed by applicant.

Date: _____ Attn: _____ Fax: _____

The following applicant has applied for residency at one of our properties. Please verify the information given below and fax to: (423)913-2445

Name(s): _____

Address: _____

Address: _____

Applicant hereby authorizes verification of all information set forth in the application for rental, including release of information by any landlord (past or present).

Signature

Date

Section to be completed and signed by landlord.

Company Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Current Resident

Previous Resident

Date of Occupancy: _____ Length of Occupancy: _____ Rental Amount: _____

Any Late Payments? Yes No How Many: _____

NSF's? Yes No How Many: _____

Any Pets? Yes No

Proper Notice Given? Yes No

Deposit Refunded? Yes No Pending

Has a detainer warrant ever been filed? Yes No

Is there a balance outstanding to your community? Yes No

I hereby certify that the statements above are true and complete to the best of my knowledge.

Signature

Date

Title

