

JAHO RENTAL APPLICATION

PO Box 7444
Jackson, TN 38302
(731) 427-0817 FAX: (731) 427-0944

This is a preliminary application for a _____ house in _____.
(# of bedrooms) (City)

All information will be verified by the management prior to an applicant being placed on our waiting list for consideration. All applicants must meet established selection criteria.

Date: _____ Time: _____ am pm e-mail: _____

A. PERSONAL INFORMATION

1. Head of Household: _____ Age: _____
2. Social Security Number: _____ *DOB: _____ Phone No. _____
3. Address: _____ City _____ ST. _____ Zip _____
4. Marital Status: Single Separated Married Divorced
5. Name of Spouse if living together: _____ Age: _____
6. Social Security Number _____ *DOB: _____
7. Children (List only if living with you) Age Sex SS# 18 yrs. or older

8. Are either you or your spouse handicapped or disabled? Yes No

B. RENTAL HISTORY

9. Please explain why you are leaving present housing and seeking housing with JAHO?

10. Length of time at current address (in item A, number 3) _____
11. Name of present landlord _____ Telephone _____
12. Landlord's Address _____

C. EMPLOYMENT/FINANCIAL BACKGROUND

13. Current Occupation _____ Length of Time in Position _____
14. Employer's Name/Address _____
15. Employer Contact Name/Telephone _____
16. Current Salary \$ _____ per hour. Number of hours per week _____ Weekly ___ Bi-Weekly ___ or Monthly
17. Name of Your Bank _____
18. Bank Address _____
19. Spouse Current Occupation _____ Length of time in position _____
20. Spouse Employer's Name/Address _____
21. Spouse Employer Contact Name/Telephone _____
22. Spouse Salary \$ _____ per hour. Number of hours per week _____
Weekly pay ___ Bi-Weekly ___ or Monthly ___

23. List **all** other **monthly** income received by **every household member** below:

Social Security	\$ _____	SSI	\$ _____
AFDC	\$ _____	Worker's Comp	\$ _____
Child Support	\$ _____	Unemployment	\$ _____
Other (Specify)	_____		\$ _____

24. Please list monthly housing expenses:

Current Monthly Rent	\$ _____	Other Expenses: Payments	
Utilities	\$ _____	Car Payment	\$ _____
Total	\$ _____	Loans	\$ _____
		Credit Cards	\$ _____
		Other	\$ _____
		Total Monthly Payments	\$ _____

D. MISCELLANEOUS

25. Are you Section 8 approved? Yes _____ No _____

If yes, in what County? _____

26. Have you or any members of your household ever:

- A. been evicted? Yes _____ No _____
- B. failed to timely pay rent? Yes _____ No _____
- C. filed for bankruptcy? Yes _____ No _____
- D. been convicted of a felony? Yes _____ No _____
- E. convicted as a sex offender? Yes _____ No _____
- F. convicted of a drug related offense? Yes _____ No _____

Please explain below if you checked "yes" for any items (in item 26).

E. REFERENCES

27. List three (3) people **not related to you by blood or marriage** that we may contact as references.

	NAME	ADDRESS	TELEPHONE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

AGREEMENT/CONSENT

I/We certify that all the information above is completed, correct and true to the best of my/our knowledge. I/We understand that false or misleading information may result in the rejection of my/our application. I/We also understand that completion of this application in no way guarantees that I/we receive rental housing. I/We authorize you to conduct an employment, background and/or credit check concerning my/our application and to verify all references.

Applicant's Signature

Co-Applicant's Signature

Date

