

ENTERPRISE PROPERTY MANAGEMENT
2965 N Germantown Road, Suite 128, Bartlett, TN 38133
Phone: 901-260-0206 Fax: 901-260-0210 Web: www.epmleasing.com

APPLICATION STANDARDS

This page is to be kept by the Applicant for their informational purposes.

Standard Credit Requirements: Minimum credit score of 550. No prior foreclosures. No monetary judgments. Bankruptcies must be discharged.

Employment History: 2 years of employment history. For self-employed, include the following: past 2 years of income tax returns and 3 months of past bank statements. *Unless otherwise retired or disabled.*

Rental History: 2 years of rental history. No prior evictions. No prior lease infringements.

Minimum Income Qualifications: Monthly Gross Income must be at least 3x the Monthly Rent amount. Roommates must meet 50% of income requirement. Please provide 2 most recent paycheck stubs (per applicant) to verify income.

Criminal History: The existence of criminal history, including felony charges or convictions of the applicant may lead to a declined application. Approval or denial of such applications will be at the specific discretion of senior management and/or by the homeowner of the desired rental property.

Standard Lease Term: Initial – 12-month minimum. Renewal – 12 month minimum or 5% premium for month-to-month.

Application Fee: \$45 per initial applicant (may include spouse). \$35 for unmarried co-applicant, or any additional applicants or co-signers.

Standard Security Deposit: 100% of monthly rent amount.

Application Checklist

Have you completed all of the items below? Make sure each of these items is completed before submitting your application.

- _____ **Completely filled out all the information required in the Application.**
- _____ **All parties have properly signed all required initial (p.4) and signature (p.5-9) spaces on application.**
- _____ **Provided accurate information for your employer and current landlord on the Employment and Rental Verification forms.**
- _____ **Provided 2 most recent paycheck stubs (per applicant) to verify income.**
- _____ **Provided proof of additional income (child support, disability, etc.), if applicable.**
- _____ **Have application fee ready to be paid via check, money order, or credit card.**
- _____ **Home held fee/security deposit ready to be paid in certified funds (if applicable).**

***For more information about our lease terms, you can view a sample copy of our lease agreement on our website in the “Rental Application” section.**

**ENTERPRISE PROPERTY MANAGEMENT
RESIDENTIAL RENTAL APPLICATION**

Please fill out COMPLETELY and RETURN to:
**2965 Germantown Rd. Suite 128
Bartlett, TN 38133
Phone: (901) 260-0206 Fax: (901) 260-0210**

DATE: _____ LEASING AGENT: _____

Property Interested In: _____

Rent/ Deposit amount \$ _____ Preferred move-in date: _____

Home Phone #: _____ Cell Phone #: _____

Work Phone #: _____ Email: _____

HOW DID YOU LEARN ABOUT EPM?

() EPMLeasing.com () Craig's List () Rentals.com () Drive By () Other: _____

PERSONAL INFORMATION

APPLICANT'S NAME _____ **SSI** _____

DOB _____ Age _____ Married () Single ()

CO-APPLICANT'S NAME _____ **SSI** _____

DOB _____ Age _____ Married () Single ()

Children – Names & Ages

1. _____ DOB _____ 2. _____ DOB _____

3. _____ DOB _____ 4. _____ DOB _____

OTHER OCCUPANT & Relation to Applicant: _____

HAS ANYONE LISTED ON THIS APPLICATION BEEN CONVICTED OF A FELONY? YES () NO ()

HAS ANYONE LISTED ON THIS APPLICATION EVER BEEN EVICTED? YES () NO ()

IF YOU OWN YOUR OWN HOME

NAME OF MORTGAGE COMPANY _____

ACCOUNT # _____

PHONE #(____)_____-_____

RENTAL HISTORY

APPLICANT'S CURRENT ADDRESS: _____

CITY: _____ ST _____ ZIP _____

TELEPHONE #: (____) _____ - _____

DATES OF RESIDENCE: ___/___/___ TO ___/___/___

REASON MOVING: _____

APT NAME: _____ APT. # _____

NOTICE GIVEN (Circle One) Y N

LANDLORD'S NAME: _____

PHONE # (____) _____ - _____ FAX # (____) _____ - _____

APPLICANT'S FORMER ADDRESS: _____

CITY: _____ ST _____ ZIP _____

TELEPHONE #: (____) _____ - _____

DATES OF RESIDENCE: ___/___/___ TO ___/___/___

CO-APPLICANT'S CURRENT ADDRESS: _____

CITY: _____ ST _____ ZIP _____

TELEPHONE #: (____) _____ - _____

DATES OF RESIDENCE: ___/___/___ TO ___/___/___

REASON MOVING: _____

APT NAME: _____ APT. # _____

NOTICE GIVEN (Circle One) Y N

LANDLORD'S NAME: _____

PHONE # (____) _____ - _____ FAX # (____) _____ - _____

CO-APPLICANT'S FORMER ADDRESS: _____

CITY: _____ ST _____ ZIP _____

TELEPHONE #: (____) _____ - _____

DATES OF RESIDENCE: ___/___/___ TO ___/___/___

EMPLOYMENT HISTORY

APPLICANT'S EMPLOYER _____

APPLICANT'S SUPERVISOR: _____

ADDRESS: _____

CITY _____ ST _____ ZIP _____

PHONE #: (____) _____ - _____ FAX #: (____) _____ - _____

POSITION _____ SALARY \$ _____ per _____

DATE STARTED _____

PREVIOUS EMPLOYER _____

PHONE #: (____) _____ - _____

CO-APPLICANT'S EMPLOYER _____

SUPERVISOR: _____

ADDRESS: _____

CITY _____ ST _____ ZIP _____

PHONE #: (____) _____ - _____ FAX #: (____) _____ - _____

SALARY \$ _____ per _____ DATE STARTED: _____

PREVIOUS EMPLOYER _____

PHONE #: (____) _____ - _____

FINANCIAL AND BANK INFORMATION**APPLICANT:**

NAME OF BANK: _____

BRANCH _____ ST _____ ZIP _____

PHONE # (____) _____ - _____ FAX # (____) _____ - _____

 CHECKING SAVINGS LOAN**CO-APPLICANT:**

NAME OF BANK: _____

BRANCH _____ ST _____ ZIP _____

PHONE # (____) _____ - _____ FAX # (____) _____ - _____

 CHECKING SAVINGS LOAN**ADDITIONAL INCOME**

Such as child support, social security, disability, etc. Please provide documentation of amount.

SOURCE: _____ AMOUNT \$ _____

SOURCE: _____ AMOUNT \$ _____

VEHICLE INFORMATION

We do not allow vehicles without permission. Vehicles not approved in writing may be towed at owner's expense.

One vehicle per listed driver.

1. MAKE _____ MODEL _____ YEAR _____

COLOR _____ LICENSE PLATE ST & # _____

2. MAKE _____ MODEL _____ YEAR _____

COLOR _____ LICENSE PLATE ST & # _____

DRIVER'S LICENSE #: APPLICANT'S: _____ ST: _____

CO-APPLICANT'S: _____ ST: _____

DO YOU OWN ANY RECREATIONAL VEHICLES?

 BOAT CAMPER/RV OTHER _____**PET INFORMATION**

NUMBER OF PETS _____ TYPE _____

HOUSEBROKEN (Circle One) Y N WEIGHT _____ AGE _____

HOW LONG OWNED _____

IN CASE OF ILLNESS, ACCIDENT OR EMERGENCY PLEASE NOTIFY:

NAME: _____ RELATIONSHIP: _____
 PHONE: (day) _____ (evening) _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 DOCTOR: _____ HOSPITAL: _____
 PHONE: _____

PLEASE READ THESE CONDITIONS BEFORE SIGNING THIS APPLICATION:

All homes are by default **non-smoking** properties. Tenant hereby agrees not to engage in any criminal activity, including illegal drugs and illegal use of firearms. Each pet will be charged a **non-refundable \$300.00** fee and must be previously approved by Enterprise Property Management (herein known as Lessor). This condition of pet ownership applies through the duration of your tenancy with Enterprise Property Management.

A **non-refundable** processing charge is payable with this application. Applicant understands that the processing charge will not be refunded under any circumstances or applied to any monies for Lessor. Processing charges are **\$45.00** for Applicant/Spouse; **\$35.00** per each additional applicant and/or co-signer. In the event of more than one resident, each resident understands he/she is jointly and severally liable for each provision of this contract. Lessor agrees to either approve or disapprove this application within 72 hours, provided that Applicant has made available all information required in the application document.

A home holding deposit in the amount of **\$250.00** is payable at the time of the submission of this application in order to remove the residence from the "FOR RENT MARKET". This deposit will hold the home off market for one week from date of submission. **Lessor is not obligated to hold the property off the market unless the home holding deposit is paid in full in certified funds.**

If applicant fails to fulfill these conditions, this application will be deemed to have been withdrawn and Lessor or applicant will be under no further obligation; however, if applicant changes his/her mind about the unit after being approved, or for any other reason is not able to assume occupancy of the home, the deposit will be retained by the Lessor as liquidated damages. If Applicant is approved, the home holding deposit only, not application fee, will be credited towards the security deposit on the property applied for at the time lease is executed on the property. If applicant is not approved, the deposit only, not the application fee, will be refunded to applicant. This deposit will be refunded in no sooner than two (2) working days. For refunding purposes, all refunds will be made in the form of an ENTERPRISE PROPERTY MANAGEMENT, INC. company check.

Applicant may submit the full required security deposit to have the property withheld from the "FOR RENT MARKET" for a period of two weeks from the date of submission. The conditions set forth in the preceding paragraphs for the home held deposit apply in the exact same fashion to this full security deposit payment.

If the applicant's check is returned twice by his/her bank for insufficient funds, either for his/her rent and/or for any other payments to Enterprise Property Management, the applicant understands that Enterprise Property Management may at its option require all future payments to be made in the form of cashier's check or money order. **All monies paid at the Lease origination must be paid in certified funds.**

Applicant understands that the giving of false information or tendering a bad check may at Lessor's option breach and void any subsequent lease. Notice in writing may be mailed to resident at leased premises or delivered to resident in person. Lessor's failure to deliver possession of the premises at the time agreed upon shall not subject Lessor to damages in any amount whatsoever. Should applicant be approved to lease this subject property, then his/her rent must begin in not more than seven (7) days from the date of the notice of approval.

- **By initialing below, I certify that I have read and understand all of the conditions set forth above:**

Applicant's Initials: _____

Co-Applicant's Initials: _____

I understand that this application is a part of my lease agreement. Also that as a part of normal procedure for processing this application, an investigative consumer report may be obtained whereby information is secured through interviews with persons with whom I am acquainted. This report, if obtained, typically contains information as to my character, general reputation, personal characteristics and mode of living. I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of this report. I understand that I may obtain this information by writing directly to a credit bureau, who will compile this report for a fee.

Facsimile copies of this document, as well as signatures hereon, may, in the discretion of EPM, be treated as originals.

APPLICANT'S SIGNATURE _____ **DATE:** _____

CO-APPLICANT'S SIGNATURE _____ **DATE:** _____

EPM REPRESENTATIVE **DATE**

- **I/We have hereby paid the required application fee* by:**
 check, money order, credit card, in the amount of _____.

*Application fee is \$45 for initial applicant (alone, or with spouse), and \$35 for each additional applicant.

Optional:

- I/We hereby place a \$250.00 home holding deposit, to take the property off the market for one week, in the form of a: cashier's check, money order, credit card.
- I/We hereby place a full security deposit on the selected property, to hold off the market for 2 weeks, in the form of a: cashier's check, money order, credit card.

Credit Card Authorization

NAME (as it appears on card)	BILLING ADDRESS:
CARD NUMBER	CITY, STATE, ZIP
VERIF. CODE	AMOUNT AUTHORIZED**
EXP. DATE	AUTHORIZING SIGNATURE

** A 2.19% processing fee will be added to all credit card transactions.

**ENTERPRISE PROPERTY MANAGEMENT
EMPLOYMENT VERIFICATION REQUEST**

Employee Name: _____

Employer/Company Name: _____

EMPLOYER PHONE #(____)_____-_____- **EMPLOYER FAX #**(____)_____-_____-

Facsimile copies of this document, as well as signatures hereon, may, in the discretion of EPM, be treated as originals.

I hereby authorize Enterprise Property Management to obtain any employment information in connection with rental application made and further hold all parties harmless from any liability in the release of such information.

EMPLOYEE SIGNATURE: _____ **DATE:** _____

(To Be Completed By Employer)

Company Name: _____

Dates of Employment: **From:** _____ **To:** _____

Position with Company: _____

Current Pay Rate: _____ **Hours Per Week:** _____

Completed By: _____

Signature

Title: _____ **Date:** _____

(To Be Completed By Employer)

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Fax #: 901.260.0210**

**ENTERPRISE PROPERTY MANAGEMENT
EMPLOYMENT VERIFICATION REQUEST**

Employee Name: _____

Employer/Company Name: _____

EMPLOYER PHONE #(____)_____-_____- EMPLOYER FAX #(____)_____-_____

Facsimile copies of this document, as well as signatures hereon, may, in the discretion of EPM, be treated as originals.

I hereby authorize Enterprise Property Management to obtain any employment information in connection with rental application made and further hold all parties harmless from any liability in the release of such information.

EMPLOYEE SIGNATURE: _____ DATE: _____

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Company Name: _____

Dates of Employment: **From:** _____ **To:** _____

Position with Company: _____

Current Pay Rate: _____ **Hours Per Week:** _____

Completed By: _____

Signature

Title: _____ **Date:** _____

(To Be Completed By Employer)

**PLEASE RETURN TO ENTERPRISE PROPERTY MANAGEMENT
Fax #: 901.260.0210**

ENTERPRISE PROPERTY MANAGEMENT
RENTAL VERIFICATION REQUEST

TENANT NAME: _____

TENANT NAME: _____

ADDRESS: _____

LANDLORD NAME: _____

LANDLORD PHONE: _____

LANDLORD FAX: _____

I hereby authorize Enterprise Property Management to obtain any rental information in connection with rental application made and further hold all parties harmless from any liability in the release of such information.

Facsimile copies of this document, as well as signatures hereon, may, in the discretion of EPM, be treated as originals.

TENANT SIGNATURE: _____ DATE: _____

CO-TENANT SIGNATURE: _____ DATE: _____

(Office/Landlord Use Only)

Monthly Rent Amount: _____ Lease Start Date: _____ End Date: _____

Number of Tenants on Lease: _____ (Projected) Move Out Date: _____

Number of Late Payments: _____ Number of Pets on Lease: _____

Number of NSF Payments: _____

Lease Terms Fulfilled? YES NO

Outstanding Balance? YES NO

Proper Notice Given? YES NO

Was Tenant Asked to Vacate by Landlord? YES NO

Eviction in Process? YES NO

Would You Re-rent to Tenant? YES NO

Any complaints or damages: _____

COMPLETED BY: _____ DATE: _____

(Office/Landlord Use Only)

PLEASE RETURN TO ENTERPRISE PROPERTY MANAGEMENT
Fax #: 901.260.0210

ENTERPRISE PROPERTY MANAGEMENT

Credit Report Authorization

PRINT CLEARLY

APPLICANT

CO-APPLICANT

LAST NAME: _____

FIRST & MI: _____

SSN: _____

ADDRESS: _____

CITY, ST & ZIP: _____

PRIOR ADDRESS: _____

CITY, ST & ZIP: _____

BIRTHDATE: _____

PHONE #: _____

I/WE HEREBY AUTHORIZE DISCLOSURE OF INFORMATION IN MY/OUR CREDIT REPORT TO INDIVIDUALS OR COMPANIES WHO ARE DIRECTLY INVOLVED IN THE PROPOSED RENTAL.

APPLICANT'S SIGNATURE: _____ DATE: _____

CO-APPLICANT'S SIGNATURE: _____ DATE: _____

Facsimile copies of this document, as well as signatures hereon, may, in the discretion of EPM, be treated as originals.

**Applicants: Please return this form to:
ENTERPRISE PROPERTY MANAGEMENT, INC.
2965 GERMANTOWN RD, SUITE 128
BARTLETT, TN 38133**

Or fax to: 901.260.0210