

Rick McClintock
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CREDIT APPLICATION

Address of Commercial Property to be leased. _____

Business Information

DBA: _____ DUN # _____
Sole Proprietor () C-Corporation () S-Corp () LLC () Other: _____
Address of Business: _____
City: _____ State: _____ Zip: _____
Phone : () _____ Web Page: _____
EIN: _____ Contact Phone # _____
E-mail: _____

Applicant 1

Name _____ Date _____
Address _____ City _____ State _____ Zip _____
How long at address _____ Own or Rent _____
Employed by _____ Position _____
How long _____ Salary \$ _____
No. dependents _____ E-mail: _____

Applicant 2

Name _____ Date _____
Address _____ City _____ State _____ Zip _____
How long at address _____ Own or Rent _____
Employed by _____ Position _____
How long _____ Salary \$ _____
No. dependents _____ E-mail: _____

Please attach financial statement or provide sources of income to demonstrate ability to pay a minimum of 3 lease payments.

Other sources of income:

_____ \$ _____
_____ \$ _____
_____ \$ _____

_____ \$ _____

Outstanding obligations:

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

List other investments owned R/E, Stocks, Bonds.

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Pending lawsuits _____

Have you filed bankruptcy within last 6 years? _____

Attach a copy of resume, business plan or provide short description of your business:

Credit references:

Name _____ Address _____
Name _____ Address _____
Name _____ Address _____

Bank references:

Name _____ Address _____
Checking _____ Savings _____

Name _____ Address _____
Checking _____ Savings _____

Personal reference: _____ Relationship: _____
Address: _____ Home phone# _____ Work phone# _____

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Address: _____ Home phone# _____ Work phone# _____

Please list other comments that may be useful in making this credit decision:

Pets: Dog _____ (list breed) wt. _____ lbs. Cat _____ wt. _____ lbs. Bird _____ Other _____
Pets only allowed by special amendment to lease and extra deposit and monthly fees apply.

First month lease \$ _____

Security deposit \$ _____

Application processing fee \$ 50.00 **Non-refundable (\$50.00 for first credit report \$50.00 for each additional report required)**

Other fees \$ _____ Description: _____

Applicant has deposited herewith the sum of \$50.00, receipt of which is hereby acknowledged is an application fee and is non-refundable if applicant is disapproved because he/she has provided inaccurate or incomplete information, applicant does not meet rental/credit requirement standards, or because of bad credit or references, lessor shall retain said deposit to cover the cost of processing this application. The undersigned represents that the above statements are true and complete and authorizes verification of information and references given.

I certify that all of the information given above is true and correct and understand that my lease, credit or rental agreement may be terminated if I have made any false or incomplete statements in this application. Rick McClintock reserves the right to not render any lease/credit decision of any type until this form is completed and verified. I authorize verification of the information provided in this application from my credit sources, current and previous landlords, employers and personal references.

Signature of Applicant: _____ Date: _____

Signature of Applicant: _____ Date: _____

Consent to Background and Reference Check

I authorize Ricky L. McClintock to obtain information about me from my credit sources, banks, current and previous landlords, employers and personal references. I authorize my credit sources, current and previous landlords, employers and personal references to disclose to Ricky L. McClintock such information about me as he may request. This authorization is good now and anytime in the future as long as the requested credit information is being utilized in conjunction with the attached application and lease. Authorization is also granted if this business arrangement results in the tenant owing the landlord monies or any type of collection situation.

Name(s): _____

Date of Birth: _____

Address: _____

City, State, Zip: _____

Social Security Number(s): _____

EIN _____

Signature: _____ Date: _____

Signature: _____ Date: _____