

*Knighthawk LLC*

*A Dragonfyre Company*

Knighthawk LLC, Bradford Division

1916 Pike Pl Ste 12-347, Seattle, WA 98101

Email: [CustomerSupport@KnighthawkLLC.com](mailto:CustomerSupport@KnighthawkLLC.com)

**Tenant #1 Information:**

Full Name (Printed): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(DD MMM YYYY)

Job/Place of Employment/Mean of Making Money: \_\_\_\_\_

Phone:(home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_  
(Include Area Code)

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(If and Only If it will be other than the Property Address – PLEASE PRINT)

Renter's/Private Property Insurance:

--Tenant#1 Has It \_\_\_ Does Not Have It \_\_\_ Insurance Company Name: \_\_\_\_\_

**Tenant #2 Information:**

Full Name (Printed): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(DD MMM YYYY)

Job/Place of Employment/Mean of Making Money: \_\_\_\_\_

Phone:(home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_  
(Area Code Included)

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(If and Only If it will be other than the Property Address – PLEASE PRINT)

Renter's/Private Property Insurance:

--Tenant#2 Has It \_\_\_ Does Not Have It \_\_\_ Insurance Company Name: \_\_\_\_\_

**Dependents (including children)/Additional Household Member Information:**

1: Full Name (Printed): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(DD MMM YYYY)

2: Full Name (Printed): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(DD MMM YYYY)

3: Full Name (Printed): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(DD MMM YYYY)