Received on _____ (date) at _____ (time)

TEXAS ASSOCIATION OF REALTORS®

RESIDENTIAL LEASE APPLICATION

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Each occupant and co-applicant 18 years or older must submit a separate application.

Property Address: _____
Anticipated: Move-in Date: _____ Monthly Rent: $_____ Security Deposit: $_____
Initial Lease Term Requested: _____ (*months*)

Property Condition: **Applicant is strongly encouraged to view the Property prior to submitting any application**. Landlord makes no express or implied warranties as to the Property's condition. Applicant requests Landlord consider the following repairs or treatments should Applicant and Landlord enter into a lease: _____
_____
_____
_____.

Applicant was referred to Landlord by:
❑ Real estate agent _____(*name*) _____(*phone*)_____(*e-mail*)
❑ Newspaper ❑ Sign ❑ Internet ❑ Other _____

Applicant's name (first, middle, last) _____
Is there a co-applicant? ❑ yes ❑ no ***If yes, co-applicant must submit a separate application.***
Applicant's former last name (maiden or married) _____
E-mail _____ Home Phone _____
Work Phone _____ Mobile/Pager _____
Soc. Sec. No. _____ Driver License No. _____ in _____(*state*)
Date of Birth_____ Height _____ Weight _____ Eye Color _____
Hair Color _____ Marital Status _____ Citizenship _____(*country*)

Emergency Contact: *(Do not insert the name of an occupant or co-applicant.)*

Name: _____
Address: _____
Phone: _____ E-mail: _____

Name all other persons who will occupy the Property:
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____

Applicant's Current Address: _____ Apt. No._____
_____(*city, state, zip*)
Landlord or Property Manager's Name: _____ Email: _____
Phone: *Day:* _____ *Nt:* _____ *Mb:* _____ *Fax:* _____
Date Moved-In_____ Move-Out Date _____ Rent $_____
Reason for move: _____

Applicant's Previous Address: _____ Apt. No._____
_____(*city, state, zip*)

Landlord or Property Manager's Name: _____ Email: _____
Phone: *Day:* _____ *Nt:* _____ *Mb:* _____ *Fax:* _____
Date Moved-In _____ Move-Out Date _____ Rent $ _____
Reason for move: _____

Applicant's Current Employer: _____
Address: _____ (*street, city, state, zip*)
Supervisor's Name: _____ Phone: _____ Fax: _____
E-mail: _____
Start Date: _____ Gross Monthly Income: $ _____ Position: _____
Note: If Applicant is self-employed, Landlord may require one or more previous year's tax return attested by a CPA, attorney, or other tax professional.

Applicant's Previous Employer: _____
Address: _____ (*street, city, state, zip*)
Supervisor's Name: _____ Phone: _____ Fax: _____
E-mail: _____
Employed from _____ to _____ Gross Monthly Income: $ _____ Position: _____

Describe other income Applicant wants considered: _____

List all vehicles to be parked on the Property:

Type	Year	Make	Model	License Plate No./State	Mo.Pymnt.

Will any pets (dogs, cats, birds, reptiles, fish, and other pets) be kept on the Property? ❑ yes ❑ no
If yes, list all pets to be kept on the Property:

Type & Breed	Name	Color	Weight	Age in Yrs.	Gender	Neutered?	Declawed?	Rabies Shots Current?	Bite History?
						❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N
						❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N
						❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N
						❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N	❑ Y ❑ N

Yes	No	
❑	❑	Will any waterbeds or water-filled furniture be on the Property?
❑	❑	Does anyone who will occupy the Property smoke?
❑	❑	Will Applicant maintain renter's insurance?
❑	❑	Is Applicant or Applicant's spouse, even if separated, in military?
❑	❑	If yes, is the military person serving under orders limiting the military person's stay to one year or less?
		Has Applicant ever:
❑	❑	been evicted?
❑	❑	been asked to move out by a landlord?
❑	❑	breached a lease or rental agreement?
❑	❑	filed for bankruptcy?
❑	❑	lost property in a foreclosure?
❑	❑	had <u>*any*</u> credit problems, including any outstanding debt (e.g., student loans or medical bills), slow-pays or delinquencies?
❑	❑	been convicted of a crime? If yes, provide the location, year, and type of conviction below.

❑ ❑ Is any occupant a registered sex offender? If yes, provide the location, year, and type of conviction below.

❑ ❑ Is there additional information Applicant wants considered?

Additional comments:_____

_____

_____.

Authorization: Applicant authorizes Landlord and Landlord's agent, at any time before, during, or after any tenancy, to:

(1) obtain a copy of Applicant's credit report;
(2) obtain a criminal background check related to Applicant and any occupant; and
(3) verify any rental or employment history or verify any other information related to this application with persons knowledgeable of such information.

Notice of Landlord's Right to Continue to Show the Property: Unless Landlord and Applicant enter into a separate written agreement otherwise, the Property remains on the market until a lease is signed by all parties and Landlord may continue to show the Property to other prospective tenants and accept another offer.

Privacy Policy: Landlord's agent or property manager maintains a privacy policy that is available upon request.

Fees: Applicant submits a non-refundable fee of $_____ to _____ (entity or individual) for processing and reviewing this application. Applicant ❑ submits ❑ will not submit an application deposit of $_____ to be applied to the security deposit upon execution of a lease or returned to Applicant if a lease is not executed.

Acknowledgement & Representation:

(1) Signing this application indicates that Applicant has had the opportunity to review Landlord's tenant selection criteria, which is available upon request. The tenant selection criteria may include factors such as criminal history, credit history, current income and rental history.
(2) Applicant understands that providing inaccurate or incomplete information is grounds for rejection of this application and forfeiture of any application fee and may be grounds to declare Applicant in breach of any lease the Applicant may sign.
(3) Applicant represents that the statements in this application are true and complete.

_____

Applicant's Signature Date

For Landlord's Use:

On _____, _____ (name/initials) notified

❑ Applicant ❑ _____ by ❑ phone ❑ mail ❑ e-mail ❑ fax ❑ in person

*that Applicant was ❑ approved ❑ not approved. Reason for disapproval:*_____

_____

TEXAS ASSOCIATION OF REALTORS®

AUTHORIZATION TO RELEASE INFORMATION RELATED TO A RESIDENTIAL LEASE APPLICANT

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I, _____ (Applicant), have submitted an application to lease a property located at _____

_____ *(address, city, state, zip).*

The landlord, broker, or landlord's representative is:

HomeSELLutions Property Management *(name)*
785 Bendel Ranch Road *(address)*
Canyon Lake, TX 78133 *(city, state, zip)*
Doug's cell (210)275-1997 *(phone)* **(830)833-0581** *(fax)*
DougSellsHomes@gvtc.com *(e-mail)*

I give my permission:

(1) to my current and former employers to release any information about my employment history and income history to the above-named person;

(2) to my current and former landlords to release any information about my rental history to the above-named person;

(3) to my current and former mortgage lenders on property that I own or have owned to release any information about my mortgage payment history to the above-named person;

(4) to my bank, savings and loan, or credit union to provide a verification of funds that I have on deposit to the above-named person; and

(5) to the above-named person to obtain a copy of my consumer report (credit report) from any consumer reporting agency and to obtain background information about me.

_____

Applicant's Signature Date

Note: Any broker gathering information about an applicant acts under specific instructions to verify some or all of the information described in this authorization. The broker maintains a privacy policy which is available upon request.