Received on \_\_\_\_\_(date) at \_\_\_\_(time)



## 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)		
A. Applicant Identification:			
Applicant's name (as listed on proof of identity			
Applicant's former last name (if			
E-mail Mobile Ph			
Work Ph. Home Ph. Do you consent to receiving text messages? yes no Soc. Sec. No.			
Driver License/ID No.	ges≀ yes no :n	Soc. Sec. No	
Unight Weight	III	olor (state) Date of Birth Dlor Hair Color	
Height weight	шуе С	DIOI Hall Coloi	
		-applicant must submit a separate application. relationship	
Co-applicant's name		relationship	
		relationship	
		rolationip	
B. Property Condition:			
Applicant has has not viewed the F	Property in-person p	ior to submitting this application.	
Applicant is strongly encouraged to	view the Property	in-person prior to submitting any application.	
		the Property's condition. Applicant requests Landlord d Applicant and Landlord enter into a lease:	
C. Representation and Marketing:		·	
Is Applicant represented by a REALTO If yes, Name: <u>Lawrence Whiteing</u> Company:WestSide Realty	OR® or other agent	_, _	
E-mail: info@westsiderealtyhoustor	1.com	Phone Number: (832)893-4850	
Applicant was made aware of Property Sign Internet Other			

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Residential Lease Application conce	rning			
D. Applicant Information:				
Housing:				
Applicant's Current Addre				
Landlord or Property Man	agar's Name:			(city, state, zip)
Landlord or Property Man Email:	iagoi s i vairio.			
Email: Phone: <i>Dav:</i>	Nt:		Fax:	
Phone: <i>Day:</i> Move In Date:	Move Ou	ıt Date:	Rent \$	
Reason for move:				
Applicant's Previous Addr	·ess:		Apt. N	lo
				(city, state, zip)
Landlord or Property Man Email:	nagers Name:			
Phone: <i>Day:</i>	Nt:	 Mb:	Fax:	
Phone: <i>Day:</i> Move In Date	Move O	ut Date:	 Rent \$	_
Reason for move:				
Applicant's Current Emplo Address:	oyer:		(stre	vet, city, state, zip)
Employment Verification	Contact:		Phone:	<del>( ) )</del> ,, <sub>1</sub> ,
Eov: E	moil:			
Start Date:	Gross Monthly Inc	come: \$	Position:	
Note: If Applicant is se		d may require one or i		
Applicant's Previous Empl	lover:			
Address:			(stre	et, city, state, zip)
Employment Verification	Contact:		Phone:	•
Fax: E	-mail:			
Fax: E- Employed from	to Gr	oss Monthly Income: \$	Position:	
Note: Applicant is responses.	onsible for including t	the appropriate contac	ct information for employ	ment verification
Describe other income Appli	icant wante considers	٠.٨٠		
Describe other income Appli				
•				
Emergency Contact: (Do	not insert the name	e of an occupant or c	co-applicant.)	
Name and Relations	hin <sup>.</sup>			
Address:	TIIP			
City:		State:	Zip Code:	
Phone:	E-mail:	otato:	Zip Code:	

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Residential l	e Application concerning				
E. Occupant Information:					
Name all d	persons that are not co-applicants who will occupy the Property:				
Name:	Relationship: DOB:	_			
Name:	Relationship: DOB:				
ivame:	Relationship: DOB:				
name:	Relationship: DOB:				
F. Vehicl	formation:				
List all veh	s to be parked on the Property (cars, trucks, boats, trailers, motorcycles, other types of vehicles	s):			
<u>Ty</u>	Year Make Model License Plate No./State Mo. Payment	<u>:</u>			
Note: State	cal, and/or HOA ordinances may restrict your ability to park certain vehicles on the Property.				
G. Anima					
Will any a	als (dogs, cats, birds, reptiles, fish, other types of animals) be kept on the Property?				
If yes, list	nimals to be kept on the Property:				
Type & Bree	Name         Color         Weight         Age in Yrs.         Gender         Neutered?         Bite History?         Shots Current?         Animal?           Y N Y N Y N Y N Y N Y N Y N Y N Y N Y N	2 7 7 7			
	animals listed above are assistance animals, please provide appropriate documentation with commodation request for the assistance animal(s).	) á			
H. Additi	I Information:				
<u>Yes</u> <u>No</u>					
	Will any waterbeds or water-filled furniture be on the Property?  Does anyone who will occupy the Property smoke or vape?  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 Appli	ever:				
<u>Yes</u> <u>No</u>	h a a a a si inta dO				
$\dashv$ $\vdash$	been evicted?				
$\dashv$ $\vdash$	been asked to move out by a landlord? breached a lease or rental agreement?				
+	filed for bankruptcy?				
$\dashv$ $\vdash$	lost property in a foreclosure?				
	been convicted of a crime? If yes, provide the location, year, and type of conviction below	٨.			

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Fax: 609-222-8716

Reside	sidential Lease Application concerning	
<u>Yes</u>	s No	
	Is any occupant a registered sex offende	r? If yes, provide the location, year, and type of
	conviction below.	low-pays or delinguencies? If yes, provide more
	information below.	ow-pays of definiquencies? If yes, provide more
	Is there additional information Applicant w	/ants considered?
Additi ———	ditional comments:	
		·
I. A	Authorization:	
tenan (1	plicant authorizes Landlord and Landlord's authorized agnancy, to: (1) obtain a copy of Applicant's credit report;	
•	<ul><li>(2) obtain a criminal background check related to Applicant</li><li>(3) verify any rental or employment history or verify any o persons knowledgeable of such information.</li></ul>	
separ	parate written agreement otherwise, the Property remains on d Landlord may continue to show the Property to other prosperty.	the market until a lease is signed by all parties
Priva	vacy Policy: Landlord's agent or property manager maintains a	a privacy policy that is available upon request.
Fees:	es: Applicant submits a non-refundable fee of \$	to
	ntity or individual) for processing and reviewing this application.	
	plicant $\square$ submits $\square$ will not submit an application deposit of $\$$ posit upon execution of a lease or returned to Applicant if a le	to be applied to the security ease is not executed.
<u>Ackn</u>	knowledgement & Representation:	
(1	(1) Signing this application indicates that Applicant has his	
	selection criteria, which is available upon request. The to as criminal history, credit history, current income, and re	
(2	(2) Applicant understands that providing inaccurate or incom	nplete information is grounds for rejection of this
	application and forfeiture of any application fee and ma	y be grounds to declare Applicant in breach of
(3	<ul><li>any lease the Applicant may sign.</li><li>(3) Applicant represents that the statements in this application</li></ul>	on are true and complete.
	(4) Applicant is responsible for any costs associated with ob	
Applic	plicant's Signature	Date
For La	Landlord's Use:	
On _	on,,	(name/initials) notified
= '	Applicant by phone	mail $\square$ e-mail $\square$ fax $\square$ in person that Applicant was
∐ ар	approved not approved. Reason for disapproval:	

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request.



## **AUTHORIZATION TO RELEASE INFORMATION** RELATED TO A RESIDENTIAL LEASE APPLICANT

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to lease a pro	perty located at	(Applicant), have submitted an application
		(address, city, state, zip).
The landlord, I	broker, or landlord's representative is:	(name)
	(phone)	(city, state, zip)
I give my perm	nission:	
` '	current and former employers to release any informato to the above-named person;	ation about my employment history and income
(2) to my o person	current and former landlords to release any informati ;	on about my rental history to the above-named
` '	current and former mortgage lenders on propert ation about my mortgage payment history to the about my mortgage payment history my mortgage payment history my mortgage payment history my	•
	pank, savings and loan, or credit union to provide a ove-named person; and	a verification of funds that I have on deposit to
` '	above-named person to obtain a copy of my consung agency and to obtain background information ab	
Applicant's Sig	gnature	Date

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of the information described in this authorization. The broker maintains a privacy policy which is available upon