| Received on | (date) at | (time) |
|-------------|-----------|--------|
|-------------|-----------|--------|



TEXAS ASSOCIATION OF REALTORS®

RESIDENTIAL LEASE APPLICATION

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS® IS NOT AUTHORIZED. ©Texas Association of REALTORS®, Inc. 2014

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

| Property Address: | | | | |
|--|---------------------------------------|--------------------------|------------------------|------------------|
| Anticipated: Move-in Date | : Monthly Rent: \$ | SeSe | ecurity Deposit: \$ | |
| Property Condition: Applicant is Landlord makes no express or im following repairs or treatments sh | plied warranties as to the Pro | perty's condition. Appli | icant requests Landlor | d consider the |
| Applicant was referred to Landlor Real estate agent Newspaper Sign | - | (na | me) | (phone) |
| Applicant's name (first, middle, last last last last last last last last | | plicant must submit a | | n. |
| E-mail | | Home Phone | 9 | |
| Work Phone | | Mobile/Pager | · | |
| Soc. Sec. No. | Driver License I | No | in | (state) |
| Date of Birth | Height | Weight | Eye Color | |
| Work Phone Soc. Sec. No. Date of Birth Hair Color M | arital Status | Citizenship | ρ | (country) |
| Emergency Contact: (Do not inse Name: Address: Phone: | rt the name of an occupant or E-mail: | | | |
| | | | | |
| Name all other persons who will o | . , | Polationship: | ٨٥٥ | |
| Name: | | Relationship: | Age | : |
| Name: | | | Age | |
| Name: Name: | | | Age | |
| Applicant's Current Address: | | _ | | |
| | | | | ity, state, zip) |
| Landlord or Property Manage Email: | r's Name: | | | |
| Phone: <i>Day:</i> | Nt: | Mb: | Fax: | |
| Date Moved-In: | Move-Out Date | | | |
| Reason for move: | | | | |
| Applicant's Previous Address: | | | /- | ity, state, zip) |
| — | y Manager's Name: | | , | ny, state, zip) |
| Phone: <i>Dav</i> : | Nt: | Mh· | Fav [.] | |
| i none. Bay. | 140. | | / U.A | |

(TAR-2003) 1-1-14

| Reside | ntial Lease App | lication concerning | | | | | |
|--------------|-----------------|--|--|--|--|---------------------------------------|--|
| Da | ate Moved-In | | Move-Out Date | | Re | nt \$ | |
| Re | eason for mo | ve: | | | | | |
| Applic | ant's Current | Employer: | | | | | |
| Ac | adress: | | | | | (street | city, state, zip) |
| St | upervisor's Na | ame: | | Phone: _ | | Fax: | |
| E- | -mail: | Gross | NA the bar bar a | | D W. | | |
| | | | | | | | ested by a CDA |
| IVO | | icant is self-employed, by, or other tax professi | | e one or more | previous year s | lax relum alle | ested by a CPA, |
| Applic Ac | ant's Previou | s Employer: | | | | (street | city, state, zip) |
| Sı | upervisor's Na | ame: | | Phone: | | | |
| E- | -mail: | | | | | | |
| Er | mployed from | to | Gross Monthl | ly Income: \$ _ | | Position: | |
| | | ome Applicant wants co | | | | | |
| List all | I vehicles to b | pe parked on the Prope Year | erty: <u>Make</u> | Model | License | e/State | Mo.Pymnt. |
| If yes, | | , cats, birds, reptiles, fi be kept on the Prope <u>Name</u> <u>Color</u> | • • | Gender | Property? yes Neutered? yes no yes no yes no yes no | Declawed? yes no yes no yes no yes no | Rabies Shots Current? yes no yes no yes no |
| Yes | No | Does anyone who Will Applicant make Is Applicant or Applicant or If yes, is the year or less? | | perty smoke? nce? en if separated | Property? | _, _ | |
| | | breached a le filed for bank lost property had <u>any</u> cre bills)), slow-p been convicte Is any occupant a Are there any cri | ? o move out by a lanc ease or rental agreer | nent? ling any outsta s? nder? g against any o | occupant? | g., student lo | ans or medical |

| Residential Lease Application concerning |
|--|
| 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 |
| 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 ,a (name/initials) notified |
| Applicant |
| approved not approved. Reason for disapproval: |

(TAR-2003) 1-1-14 Page 3 of 4

request.



AUTHORIZATION TO RELEASE INFORMATION RELATED TO A RESIDENTIAL LEASE APPLICANT

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS® IS NOT AUTHORIZED.

©Texas Association of REALTORS®, Inc. 2014

| | e a property located at | | (address, city, state, zip). |
|----------|--|-----------------------------------|---|
| | | | , |
| The lar | ndlord, broker, or landlord's representa | ative is: | |
| | BUCKEYE R | (name) | |
| | | OX 3311 | (address) |
| | | TX 77373 | (city, state, zip) |
| | | one) (713)957-4444 | (fax) |
| | BUCKEYERENTA | ALS@GMAIL.COM | (e-mail) |
| I give n | ny permission: | | |
| (1) | to my current and former employers the above-named person; | to release any information abou | t my employment history and income history to |
| (2) | to my current and former landlords to | to release any information about | my rental history to the above-named person; |
| (3) | to my current and former mortgage I my mortgage payment history to the | | r have owned to release any information about |
| (4) | to my bank, savings and loan, or above-named person; and | credit union to provide a verific | cation of funds that I have on deposit to the |
| (5) | to the above-named person to obta agency and to obtain background in | | ort (credit report) from any consumer reporting |
| (5) | | | |
| (5) | | | |
| (5) | | | |
| (5) | | | |

(TAR-2003) 1-1-14 Page 4 of 4

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