

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.

Anticipated: Move-in Date:	Property Address:				
Real estate agent			ly Rent: \$	Security Depos	it: \$
Newspaper Sign Internet Other					
Applicant's name (first, middle, last) Is there a co-applicant?	Real estate agent			name)	(phone)
Is there a co-applicant? no	☐ Newspaper ☐ Sign ☐	Internet Other			
Applicant's former last name (maiden or married)	Applicant's name (first, middle, las	st)			
Applicant's former last name (maiden or married)	Is there a co-applicant?	ves no If	yes, co-applicant must su	bmit a separate applic	ation.
Home Phone Mobile/Pager Soc. Sec. No. Driver License No. In (state)					
Mork Phone Mobile/Pager Soc. Sec. No. Driver License No. in	E-mail		Home Ph	one	
Name:	Work Phone	Mobile/Pager			
Name:	Soc. Sec. No.	Dri	ver License No		in(state)
Name:	Date of Birth	Height	Weight	Eye Colo	<u> </u>
Name:	Hair Color Marita	al Status	Cit	izenship	(country)
Name:	Emergency Contact: (Do not inser	t the name of an occ	upant or co-applicant.)		
Name all other persons who will occupy the Property:					
Phone:	Address:				
Name all other persons who will occupy the Property: Name:	Phone:		F-mail:		
Relationship:	1 Hone		L maii		
Name: Relationship: Age: Name: Relationship: Age: Name: Relationship: Age: Applicant's Current Address: Apt. No. Landlord's Name: Email: Phone: Day: Nt: Mb: Fax: Date Moved-In Move-Out Date Rent \$ Reason for move: Apt. No. (city, state, zip) Previous Landlord's Name: Email: Fax: Date Moved-In Date Moved-Out Rent \$ Reason for move: Applicant's Current Employer: (street, city, state, zip) Applicant's Current Employer: Address: (street, city, state, zip) Supervisor's Name: Phone: Fax: E-mail: Fax: Email:	Name all other persons who will o	ccupy the Property:			
Name: Relationship: Age: Name: Relationship: Age: Name: Relationship: Age: Applicant's Current Address: Apt. No. Landlord's Name: Email: Phone: Day: Nt: Mb: Fax: Date Moved-In Move-Out Date Rent \$ Reason for move: Apt. No. (city, state, zip) Previous Landlord's Name: Email: Fax: Date Moved-In Date Moved-Out Rent \$ Reason for move: Applicant's Current Employer: (street, city, state, zip) Applicant's Current Employer: Address: (street, city, state, zip) Supervisor's Name: Phone: Fax: E-mail: Fax: Email:	Name:		Relat	ionship:	Age:
Name: Relationship: Age: Name: Relationship: Age: Applicant's Current Address: Apt. No. Landlord's Name: Email: Phone: Day: Nt: Mb: Fax: Date Moved-In Move-Out Date Rent \$ Reason for move: Apt. No. (city, state, zip) Previous Landlord's Name: Email: Phone: Day: Nt: Mb: Fax: Date Moved-In Date Moved-Out Rent \$ Rent \$ Reason for move: Address: (street, city, state, zip) Supervisor's Name: Phone: Fax: E-mail: Phone: Fax:	Name:		Relat	ionship:	Age:
Name:	Name:				
City, state, zip) Landlord's Name:	Name:		Relat	ionship:	Age:
City, state, zip) Landlord's Name:	Applicant's Current Address:			Į.	Ant No
Landlord's Name:	Applicant o Garront Address.				
Phone: Day: Nt: Mb: Fax: Date Moved-In Move-Out Date Rent \$ Reason for move: Apt. No. Applicant's Previous Address: Email: Previous Landlord's Name: Email: Phone: Day: Nt: Mb: Fax: Date Moved-In Date Moved-Out Rent \$ Reason for move: Address: (street, city, state, zip) Supervisor's Name: Phone: Fax:	I andlord's Name:				(0.0), clate, =.p/
Reason for move: Applicant's Previous Address: Previous Landlord's Name: Phone: Day: Date Moved-In Reason for move: Applicant's Current Employer: Address: Supervisor's Name: Email: Apt. No. [city, state, zip) Mb: Fax: Rent \$ [street, city, state, zip) Fax: [street, city, state, zip) Fax: E-mail:	Phone: Day:	Nt ⁻	Mb.	Fax ⁻	
Reason for move: Applicant's Previous Address: Previous Landlord's Name: Phone: Day: Date Moved-In Reason for move: Applicant's Current Employer: Address: Supervisor's Name: Email: Apt. No. [city, state, zip) Mb: Fax: Rent \$ [street, city, state, zip) Fax: [street, city, state, zip) Fax: E-mail:	Date Moved-In	Move-0	Dut Date	Rent \$	
Applicant's Previous Address:	Reason for move:				
Previous Landlord's Name:	Applicant's Provious Address				Ant No
Previous Landlord's Name: Email:	Applicant's Frevious Address				
Phone: Day: Nt: Mb: Fax: Date Moved-In Date Moved-Out Rent \$ Reason for move:	Previous Landlord's Name:		Email:		
Date Moved-In Date Moved-Out Rent \$		N/t·	Mh:		
Reason for move:	Date Moved In		loved Out		
Applicant's Current Employer:				ιχειιι ψ	
Address: (street, city, state, zip) Supervisor's Name: Phone: Fax: E-mail:	Reason for filove.				
Address: (street, city, state, zip) Supervisor's Name: Phone: Fax: E-mail:	Applicant's Current Employer:				
Supervisor's Name: Fax: Phone: Fax: Fax:	Address:				(street, city, state, zip)
E-mail:	Supervisor's Name:		Phone:	Fax:	
Start Date: Gross Monthly Income: \$ Position:					
	Start Date:	Gross Monthl	y 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.

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Remax Lubbock 4703 S Loop 289 Lubbock, TX 79424 Phone: (806)799-4200 Fax: (806)792-3750

Residential Lease Application concerning					
Applicant's Previous Employer:					
Address:			(street, city, state, zip)		
Address:Supervisor's Name:	Phone:	Fax:			
E-mail:					
E-mail: to to	Gross Monthly Incor	ne: \$ F	osition:		
Describe other income Applicant wants considered:					
List all vehicles to be parked on the Property: <u>Type</u> Year Make	Model	License/State	Mo.Pymnt.		
List all pets to be kept on the Property (dogs, cats, bir Type & Breed Name Color Weight	Age <u>Gender</u>	other pets): Neutered? yes no yes no yes yes no yes	no 🔲 yes 🔲 no		
Will any waterbeds or water-filled furniture be on the I Does anyone who will occupy the Property smoke? Will Applicant maintain renter's insurance? Is Applicant or Applicant's spouse, even if separated, If yes, is the military person serving under orders I 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 any credit problems, slow-pays or delinquence been convicted of a crime? Is any occupant a registered sex offender? Are there any criminal matters pending against any or Is there additional information Applicant wants conside	in military?		planation		

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.

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Residential Lease Application concerning				
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 \$ for processing and reviewing this application and (check only one box if applicable):				
(1)\$ to be applied to the security deposit upon execution of a lease or returned to Applicant if a lease is not executed.				
(2) an Application Deposit of \$ in accordance with the attached Agreement for Application Deposit and Hold on Property (TAR No. 2009 or similar agreement).				
 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				
☐ Applicant ☐ by ☐ phone ☐ mail ☐ e-mail ☐ fax ☐ in person that Applicant was				
□ approved □ not approved. Reason for disapproval:				

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AUTHORIZATION TO RELEASE INFORMATION RELATED TO A RESIDENTIAL LEASE APPLICANT

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I,		(Applicant), have submitted an application			
to leas	e a property located at	(address, city, state, zip).			
	ndlord, broker, or landlord's representative is:				
		(name)			
	(phone)	(address)			
I give r	ny permission:				
(1)	to my current and former employers to release any information about the above-named person;	my employment history and income history to			
(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 I my mortgage payment history to the above-named person;	nave owned to release any information about			
(4)	my bank, savings and loan, or credit union to provide a verification of funds that I have on deposit to the pove-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.				
Applica	ant's Signature Date				
Note:	Any broker gathering information about an applicant acts under	specific instructions to verify some or all			

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

request.