

## 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  | e: M                          | onthly Rent: \$               | Sec                     | curity Deposit: \$_ |                    |
| Property Condition: <b>Applicant is</b> Landlord makes no express or in following repairs or treatments sh | plied warranties              | as to the Property            | 's condition. Applica   | int requests Land   | lord consider the  |
| Applicant was referred to Landlor  | d by:                         |                               |                         |                     |                    |
| ☐ Real estate agent<br>☐ Newspaper ☐ Sign ☐  | Internet                      | her <u>Citywide</u> R         | (name)<br>E & Prop Mgmt | , LLC               | (phone)            |
| Applicant's name (first, middle, la<br>Is there a co-applicant?<br>Applicant's former last na              | 🗖 yes 🔲 no<br>me (maiden or m | If yes, co-applica<br>arried) | nt must submit a sep    |                     |                    |
| E-mail   |                               |                               |                         |                     |                    |
| Work Phone   |                               |                               | Mobile/Pager            | <del></del>         |                    |
| Soc. Sec. No Date of Birth   |                               | _ Driver License No           | D                       | in                  | (state)            |
| Hair Color Marit   | Height<br>al Status           | We                            | ight<br>Citizenship     | Eye Color           | (country)          |
| Emergency Contact: (Do not inse  |                               |                               | •                       |                     |                    |
| ,  |                               |                               | ,                       |                     |                    |
|  |                               |                               |                         |                     |                    |
| Phone:   |                               | E-mail:                       |                         |                     |                    |
| Name all other persons who will o  | ccupy the Prope               | tv:                           |                         |                     |                    |
| Name:  | • •                           | •                             | Relationshin:           |                     | Ane:               |
| Name:  |                               |                               |                         |                     |                    |
| Name:  |                               |                               | -                       |                     | •                  |
| Name:  |                               |                               |                         |                     |                    |
| Applicant's Current Address:   |                               |                               |                         | Apt. N              | 0.                 |
|  |                               |                               |                         | •                   |                    |
| Landlord or Property Manage Email:   |                               |                               |                         |                     |                    |
| Phone: Day:  | Nt:                           | M                             | b:                      | Fax:                |                    |
| Date Moved-In  | Mo                            | ve-Out Date                   | R                       | lent \$             |                    |
| Reason for move:   |                               |                               |                         |                     |                    |
| Applicant's Previous Address:  |                               |                               |                         | Apt.                | No                 |
| Previous Landlord or Property  | / Manager's Nam               | Δ.                            |                         |                     | (city, state, zip) |
| Fmail:   | ivialiayel 5 Ivalli           | C                             |                         |                     |                    |
| Email:<br>Phone: <i>Day</i> :  | N/t·                          | Λ.Λ.                          | 'h:                     | Fav.                |                    |
| (TAR-2003) 1-1-14  |                               |                               |                         | I ax                |                    |

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|          | entiai Lease Applica                  | 3                                   |   |   |   |   |
|----------|---------------------------------------|-------------------------------------|---|---|---|---|
|          |                                       |                                     |   | e Moved-Out   | Rent \$                                     |   |
| Applic   | ant's Current Em                      | ployer:                             |   |   |   |   |
| Ad<br>Si | ddress:<br>upervisor's Name           | ):                                  |   | Phone:  | Fax:  |   |
| Si<br>N  | ote: it Applicant                     | is self-employe<br>other tax profes | a, Lanaiora r                                     | nthly Income: \$<br>nay require one or mor  | Position Position Position                  | n:<br>urn attested by a CPA,                              |
| Applic   | ant's Previous E                      | mployer:                            |   |   |   | (street city state zin)                                   |
| Si<br>E: | ddress:<br>upervisor's Name<br>-mail: | DI                                  |   | Phone:  | Fax:  | (Sireel, City, State, 21p)                                |
| E        | mployed from                          | to                                  |   | _ Gross Monthly Incom   | e:\$  | Position:   |
| Descr    | ibe other income                      |                                     | ts considered                                     |   |   |   |
| List al  | I vehicles to be p<br><u>Type</u>     | arked on the Pi<br><u>Year</u>      | operty:<br><u>Make</u>                            | <u>Model</u>  | <u>License/State</u>                        | Mo.Pymnt.   |
| If yes,  | , list all pets to be                 | kept on the Pr                      | operty:<br><u>Color</u> <u>Weigl</u>              | . , .   |   | Rabies  ed? Shots Current?  no yes no no yes no no yes no |
| Yes      | <u>№</u>                              | Does an<br>Will Appl<br>Is Applic   | yone who will<br>icant maintair<br>ant or Applica | water-filled furniture be occupy the Property smarter's insurance? Int's spouse, even if sepry person serving under | on the Property? noke? arated, in military? | ·   |

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| Residential Lease Application concerning  |
|---|
| Additional comments:  |
| <ul> <li>Authorization: Applicant authorizes Landlord and Landlord's agent, at any time before, during, or after any tenancy, to:</li> <li>(1) obtain a copy of Applicant's credit report;</li> <li>(2) obtain a criminal background check related to Applicant and any occupant; and</li> <li>(3) verify any rental or employment history or verify any other information related to this application with persons knowledgeable of such information.</li> </ul>   |
| 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 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 f a lease is not executed.   |
| <ul> <li>(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.</li> <li>(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.</li> <li>(3) Applicant represents that the statements in this application are true and complete.</li> </ul> |
| 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:  |
|   |

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request.



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

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| l,       |   | _ (Applicant), have submitted an application  |
|----------|---|---|
| to leas  | e a property located at   |   |
|          |   | (address, city, state, zip).  |
| The lar  | ndlord, broker, or landlord's representative is:  |   |
|          | Citywide Real Estate and Property Mgmt LLC  | (name)  |
|          | 105 W Washington Suite 103  | (address)   |
|          | Rockwall TX 75087   | (city, state, zip)  |
|          | (972)772-4999 (phone) (972)772-4996   | (fax)   |
|          | info@citywiderem.com  | (e-mail)  |
| I give r | ny permission:  |   |
| (1)      | to my current and former employers to release any information about me the above-named person;                                    | y 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 hamy mortgage payment history to the above-named person;      | ave owned to release any information about  |
| (4)      | to my bank, savings and loan, or credit union to provide a verification above-named person; and                                   | on of funds that I have on deposit to the   |
| (5)      | to the above-named person to obtain a copy of my consumer report agency and to obtain background information about me.            | (credit report) from any consumer reporting   |
|          |   |   |
| Applica  | nt's Signature Date   |   |
| Note:    | Any broker gathering information about an applicant acts under sinformation described in this authorization. The broker maintains | specific instructions to verify some or all<br>a privacy policy which is available upon |

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