(date) at ____(time)

TEXAS REALTORS

RESIDENTIAL LEASE APPLICATION

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

Property Address: 1505 Nichole Woods Drive, Houston, TX 77047				
Anticipated: Move-in Date:	Monthly Rent: \$1695	Security Deposit: \$1800		
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's name (first, middle, last) Is there a co-applicant? Use no <i>If yes, co-applicant must submit a separate application.</i> Applicant's former last name (maiden or married) E-mail Home Phone Mobile/Pager Soc. Sec. NoDriver License Noin(state Date of BirthHeightWeight Eye Color						
Image:						:
Breal estate agent (phone) (e-mail Applicant's name (first, middle, last)	Applicant was referred to Landlord	by:				
Applicant's name (first, middle, last) Is there a co-applicant?] yes] no If yes, co-applicant submit a separate application. Applicant's former last name (maiden or married) E-mail Home Phone Mobile/Pager Soc. Sec. No In	Real estate agent	,	<u>.(</u>	(phone)		(e-mail)
Is there a co-applicant? []yes] no <i>If yes</i> , co-applicant must submit a separate application. Applicant's former last name (maiden or married) 	Newspaper Sign Interne	et DOther				
Is there a co-applicant? [] yes [] no <i>If yes</i> , co-applicant must submit a separate application. Applicant's former last name (maiden or married) Home Phone Work Phone Soc. Sec. NoDriver License Noin(state Date of BirthHeightWeightEye Color Hair ColorMarital StatusCitizenship(country Emergency Contact: (Do not insert the name of an occupant or co-applicant.) Name: Address:E-mail: Name all other persons who will occupy the Property: Name:Relationship:Age: Name:Relationship:Age: Name:Relationship:Age: Name:Relationship:Age: Name:Relationship:Age: Applicant's Current Address:Mb:Fax: Date Moved-InMove-Out DateRent \$ Applicant's Previous Address:Apt. No Applicant's Previous Address:Apt. No Applicant's Previous Address:	Applicant's name (first middle las	t)				
Applicant's former last name (maiden or married) Home Phone E-mail Home Phone Work Phone Mobile/Pager Soc. Sec. No. Driver License No. 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: Phone: E-mail: Name: Relationship: Address: Age: Name: Relationship: Age: Age: Name: Relationship: Age: Age: Name: Relationship: Age: Relationship: Name: Relationship: Apelicant's Current Address:	Is there a co-applicant?	ves \Box no <i>If ves, o</i>	o-applicant must submi	it a separate app	lication.	
E-mail Home Phone Work Phone Mobile/Pager Soc. Sec. No. Driver License No. Date of Birth Height 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: Address: Phone: E-mail: Name: Relationship: Address: Age: Name: Relationship: Address: Age: Name: Relationship: Age: Age: Name: Relationship: Age: Age: Name: Relationship: Age: Age: Name: Relationship: Applicant's Current Address: Apt. No. Phone:Day: Mt: Date Moved-In Move-Out Date Reason for move: Apt. No. Applicant's Previous Address: Apt. No. Landlord or Property Manager's Name: Email:	Applicant's former last nam	e (maiden or marrie	ed)			
Work Finding	E-mail		Home Phone			
Emergency Contact: (Do not insert the name of an occupant or co-applicant.) Name: Address: Phone: E-mail: Name Mame all other persons who will occupy the Property: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Age: Age: Name: Relationship: Age: Relationship: Applicant's Current Address: Email:	Work Phone		Mobile/Pager			
Emergency Contact: (Do not insert the name of an occupant or co-applicant.) Name: Address: Phone: E-mail: Name Mame all other persons who will occupy the Property: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Age: Age: Name: Relationship: Age: Relationship: Landlord or Property Manager's Name: Email: Landlord or Property Manager's Name:	Soc. Sec. No	Driver Lice	nse No.		in	(state)
Emergency Contact: (Do not insert the name of an occupant or co-applicant.) Name: Address: Phone: E-mail: Name Mame all other persons who will occupy the Property: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Age: Age: Name: Relationship: Age: Relationship: Landlord or Property Manager's Name: Email: Landlord or Property Manager's Name:	Date of Birth	Height	Weight	Eye Co	olor	
Emergency Contact: (Do not insert the name of an occupant or co-applicant.) Name: Address: Phone: E-mail: Name Phone: E-mail: Name Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Name: Relationship: Age: Relationship: Age: Relationship: Age: Relationship: Name: Relationship: Age: Relationship: Landlord or Property Manager's Name: Email: City, state, zi	Hair Color Marital Sta	atus	Citize	enship		_(country)
Name all other persons who will occupy the Property: Name: Relationship: Age: Applicant's Current Address:	Name:			,		
Name all other persons who will occupy the Property: Name: Relationship: Age: Applicant's Current Address:	Phone:		E-mail:			
Name: Age: Name: Relationship: Age: Applicant's Current Address:						
Name:	Name:	., .,	Relation	ship:	Age:	
Name:			Relation	nship:	Age:	
Name: Relationship: Age: Applicant's Current Address: Apt. No. Landlord or Property Manager's Name: Email: Phone:Day: Nt: Mb: Fax: Date Moved-In Move-Out Date Rent \$ Reason for move: Apt. No. Applicant's Previous Address: Apt. No. Landlord or Property Manager's Name: Email:	Name:		Relation	nship:	Age:	
	Nama		Deletion	nship:	Age:	
	Applicant's Current Address:				Apt. No.	
Landlord or Property Manager's Name:					(city	, state, zip)
Reason for move:	Landlord or Property Manager'	s Name:		Email:		
Reason for move:	Phone: <i>Day:</i>	Nt:	_Mb:	Fa	x:	
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(city, state, zij Landlord or Property Manager's Name:Email:	Reason for move:					
(city, state, zi Landlord or Property Manager's Name:Email:	Applicant's Previous Address:				Apt. No.	
					(city	, state, zip)
(TXR-2003) 2-1-18 Page 1 of	Landlord or Property Manager'	s Name:		Email:		
	(TXR-2003) 2-1-18				I	Page 1 of 4

Residential Lease Application concerning 1505 Nichole Woods Drive, Houston, TX 77047

P	hone: <i>Day:</i>	·In	Nt:			Mb:			Fax:	
D	ate Moved-	In		Mov	e-Out Da	te		Rent	: \$ <u></u>	
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Appl	icant's Curr	ent Employer:								· · · · · · · · · · · · · · · · · · ·
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0 F	upervisor s -mail·	Name:					ə			
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		CPA, attorney, o						, ,		
Appl	icant's Prev	ious Employer:								
A	ddress:	Name:							(street	t, city, state, zip)
S	Supervisor's	Name:				_Phone	e:		Fax:	
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		ncome Applicant								
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	Туре	<u>Year</u>	<u>Make</u>		<u>iviodei</u>		LICENSE Pla	ate No./State	<u>IV</u>	<u>lo.Pymnt.</u>
	•••	ogs, cats, birds, r s to be kept on t	•		other pet	ts) be ke	ept on the	Property?	🗆 yes 🛛] no
•	& Breed		-	•	ae in Yrs.	Gender	Neutered?	Declawed?	Rabies Shots Currer	nt? Bite History?
	<u></u>	<u></u>	<u> </u>	<u></u>	3					
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<u>Yes</u>	<u>No</u>				1.6					
		Will any water						erty?		
		Does anyone will Applicant					Ke?			
		Is Applicant or					rated in m	ilitary?		
				•		•		ing the mili	tary nersor	n's stav to
		one year o	•	person	i sei ving				ary persor	
		Has Applicant								
		been evict								
		been aske	d to move	e out by	a landlor	rd?				
		breached	a lease or	rental	agreeme	nt?				
		filed for ba								
		lost proper								
						ny outs	tanding de	ebt (e.g., st	udent loans	s or medical
_	_	bills), slow					I P		1 4	
			icted of a	crime?	it yes, pr	ovide th	ne location	n, year, and	type of co	nviction
		below.								

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Residential Lease Application concerning 1505 Nichole Woods Drive, Houston, TX 77047

	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:

- 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:				
(name/initials) notified				
by □phone □mail □e-mail □fax □in person				
son for disapproval:				

TEXAS REALTORS

AUTHORIZATION TO RELEASE INFORMATION RELATED TO A RESIDENTIAL LEASE APPLICANT

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l,		(Applicant), have submitted an application
to lease a property	ocated at 1505 Nichole Woods Drive	
Houston, TX 77047		(address, city, state, zip).
The landlord, broke	r, or landlord's representative is:	
Roger Fryd	u	(name)
		(address)
		(city, state, zip)
832-578-68	88(phone)	(fax)
Roger.Fry	ou@gmail.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.

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