

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: 18107 Dardanelles Ct houston tx 77084
Anticipated: Move-in Date: _____ Monthly Rent: \$ 1850 Security Deposit: \$ 1850
Initial Lease Term Requested: 12 (months)

Property Condition: Applicant has has not viewed the Property in-person prior to submitting this application.

Applicant is strongly encouraged to view the Property in-person 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 was referred to Landlord by:
 Real estate agent _____ (name) _____ (phone) _____ (e-mail)
 Newspaper Sign Internet Other _____

Applicant's name (first, middle, last) _____
Is there a co-applicant? yes no ***If yes, co-applicant must submit a separate application.***
Applicant's former last name (maiden or married) _____

E-mail _____ Home Phone _____
Work Phone _____ Mobile _____
Soc. Sec. No. _____ Driver License No. _____ in _____ (state)
Date of Birth _____ Height _____ Weight _____ Eye Color _____
Hair Color _____ Marital Status _____

Emergency Contact: *(Do not insert the name of an occupant or co-applicant.)*

Name and Relationship: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ E-mail: _____

Name all other persons who will occupy the Property:

Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____

Applicant's Current Address: _____ Apt. No. _____

(city, state, zip)

Landlord or Property Manager's Name: _____ Email: _____
Phone: Day: _____ Nt: _____ Mb: _____ Fax: _____
Date Moved-In _____ Move-Out Date _____ Rent \$ _____
Reason for move: _____

Residential Lease Application concerning 18107 Dardanelles Ct houston tx 77084

Applicant's Previous Address: _____ Apt. No. _____
 _____ (city, state, zip)

Landlord or Property Manager's Name: _____ Email: _____
 Phone: Day: _____ Nt: _____ Mb: _____ Fax: _____
 Date Moved-In _____ Move-Out Date _____ Rent \$ _____
 Reason for move: _____

Applicant's Current Employer: _____
 Address: _____ (street, city, state, zip)

Employment Verification Contact: _____ Phone: _____
 Fax: _____ E-mail: _____
 Start Date: _____ Gross Monthly 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.

Applicant's Previous Employer: _____
 Address: _____ (street, city, state, zip)

Employment Verification Contact: _____ Phone: _____
 Fax: _____ E-mail: _____
 Employed from _____ to _____ Gross Monthly Income: \$ _____ Position: _____

Note: Applicant is responsible for including the appropriate contact information for employment verification purposes.

Describe other income Applicant wants considered: _____

List all vehicles to be parked on the Property:

| Type | Year | Make | Model | License Plate No./State | Mo. Payment |
|------|------|------|-------|-------------------------|-------------|
| | | | | | |
| | | | | | |

Will any animals (dogs, cats, birds, reptiles, fish, and other types of animals) be kept on the Property? yes no

If yes, list all animals to be kept on the Property:

| Type & Breed | Name | Color | Weight | Age in Yrs. | Gender | Neutered? | Bite History? | Rabies Shots Current? | Assistance Animal? |
|--------------|------|-------|--------|-------------|--------|---|---|---|---|
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |

If any of the animals listed above are assistance animals, please provide appropriate documentation with a reasonable accommodation request for the assistance animal(s).

- | | | |
|--------------------------|--------------------------|--|
| <u>Yes</u> | <u>No</u> | |
| <input type="checkbox"/> | <input type="checkbox"/> | Will any waterbeds or water-filled furniture be on the Property? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does anyone who will occupy the Property smoke? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will Applicant maintain renter's insurance? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is Applicant or Applicant's spouse, even if separated, in military? |
| <input type="checkbox"/> | <input type="checkbox"/> | If yes, is the military person serving under orders limiting the military person's stay to one year or less? |



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

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I, _____ (Applicant), have submitted an application to lease a property located at 18107 Dardanelles Ct houston tx 77084 (address, city, state, zip).

The landlord, broker, or landlord’s representative is:

Bakul Brahmhatt, Keller Williams Signature (name)

(address)

(city, state, zip)

(phone) _____ (fax)
bakul@kw.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.