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: 13163 stratford skies	Lane	Houston	тх 77072
Anticipated: Move-in Date:	Monthly Rent: \$1,700	Security Deposit: \$	1,700
Initial Lease Term Requested: <u>12</u>	(months)		

A. Applicant Identification:

Applicant's name (as listed on proof of identification)	
Applicant's former last name (if applicable)	
E-mail	Mobile Ph
Work Ph.	Home Ph.
Do you consent to receiving text messages? yes	🗆 no 🛛 Soc. Sec. No
Driver License/ID No.	in (state)Date of Birth
Height Weight	Eye Color Hair Color

Are there co-applicants? yes no	Note: If yes, each co-applicant must submit a separate application.
Co-applicant's name	relationship
Co-applicant's name	relationship
Co-applicant's name	relationship

B. Property Condition:

Applicant D has D 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:

C. Representation and Marketing:

Is Applicant represented by a REALTOR® or other a If yes, Name:	gent? □ yes □ no					
Company:						
E-mail:	Phone Number:					
Applicant was made aware of Property via:						

Houston

тх 77072

D. Applicant Information:

<u>Housing:</u>

Applicant's Current Add	ess			Apt. No.
				(city, state, zip)
Landlord or Property Mana	iger's Name:			
Email: Phone: <i>Day:</i> Move In Date: Reason for move:		• "		
Phone: Day:	Nt:	Mb:	Fax.	
Nove in Date:		e:	Rent: \$	
Reason for move:				
Applicant's Previous Ado	dress:			Apt. No.
Applicant's Previous Ado				(city, state, zip)
Landlord or Property Mana	iger's Name:			
Email: Phone: <i>Day:</i> Move In Date:			_	
Phone: <i>Day:</i>	Nt:	Mb:	Fax.	
Move In Date:	Move Out Dat	e:	Rent: \$	
Reason for move:				
Employment and Other I	ncome:			
	<u></u>			
Applicant's Current Emp	loyer:			
Address: Employment Verification C Fax:	-			(street, city, state, zip)
Employment Verification C	ontact <u>:</u>		Phone:	
Fax:	E-mail:			
Start Date:	Gross Monthly Inco	me: \$	Position:	
Note: If Applicant is self-en			nore previous year's	tax return attested by a
CPA, attorney,	or other tax professional.			
Applicantia Provinue Em	nlovar			
Applicant's Previous Em Address:				
Employment Verification C	ontact:		Phone:	$\underline{(}$ Sileel, City, State, Zip)
Fax:	E-mail:			
Employment Verification C Fax: Employed from	to Gross Me	onthly Income:	\$ Posi	tion:
Note: Applicant is respon	sible for including the a	opropriate cont	tact information for	employment verification
purposes.				
Describe other income App	plicant wants considered:			
Emergency Contact: (Do	not insert the name of	an occupant o	r co-applicant)	
Emergency contact. (DO		an occupant o	1 00-appiloani.)	

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

E. Occupant Information:

Name all other persons that are not co-applicants who will occupy the Property:

Name:	Relationship:	DOB:	
Name:	Relationship:	DOB:	
Name:	Relationship:	DOB:	
Name:	Relationship:	DOB:	

F. Vehicle Information:

List all	vehicles to be <u>Type</u>	e parked on the Year	Property (cars, <u>Make</u>	trucks, boats, <u>Model</u>	trailers, motorcycles, License Plate No./State	other types of vehicles): <u>Mo. Payment</u>

Note: State, local, and/or HOA ordinances may restrict your ability to park certain vehicles on the Property.

G. Animals:

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

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

							Rabies	Assistance
Name	Color	Weight	Age in Yrs.	Gender	Neutered?	Bite History?	Shots Current?	Animal?
		-					🗆 Y 🗆 N	IY IN
						🗆 Y 🗆 N	🗆 Y 🗆 N	IY IN
						🗆 Y 🗆 N	ΩYΩN	ΟYΟΝ
						U Y U N	🗆 Y 🗆 N	🗆 Y 🗆 N
	<u>Name</u>	<u>Name</u> <u>Color</u>	<u>Name Color Weight</u>	<u>Name</u> <u>Color</u> <u>Weight</u> <u>Age in Yrs.</u>	<u>Name Color Weight Age in Yrs. Gender</u>	QYQN QYQN QYQN QYQN		Name Color Weight Age in Yrs. Gender Neutered? Bite History? Shots Current? U N U

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

H. Additional Information:

Yes	No	
		Will any waterbeds or water-filled furniture be on the Property?
		Does anyone who will occupy the Property smoke or vape?
		Will Applicant maintain renter's insurance?
		Is Applicant or Applicant's spouse, even if separated, in military?
		If yes, is the military person serving under orders limiting the military person's stay to
		one year or less?
Has Ap	oplicant eve	
Yes	No	
		been evicted?

been asked to move out by a landlord?

- breached a lease or rental agreement?
- filed for bankruptcy?
- lost property in a foreclosure?
- been convicted of a crime? If yes, provide the location, year, and type of conviction below.

in	ormation below.
	there additional information Applicant wants considered?
Additional comment	S:

I. Authorization:

Applicant authorizes Landlord and Landlord's authorized 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 \$45.00 to <u>mysmartmove.com</u> (entity or individual) for processing and reviewing this application.

Applicant \Box submits \Box will not submit an application deposit of $\underbrace{0.00}$ to be applied to the security deposit upon execution of a lease or returned to Applicant if a lease is not executed.

Acknowledgement & Representation:

- (1) <u>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.</u>
- (2) <u>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.</u>
- (3) Applicant represents that the statements in this application are true and complete.
- (4) Applicant is responsible for any costs associated with obtaining information.

Applicant's Signature

Date

For Landlord's Use:						
On,,					_ (name/initial	ls) notified 🛛 Applicant
<i>□</i>	_ by	🛛 phone	🛯 mail 🖾 e-mail	🛛 fax	$oldsymbol{\square}$ in person	that Applicant was $oldsymbol{arDelta}$
approved 🛯 not approved. Reason for disapproval:						

(fax)

(e-mail)



AUTHORIZATION TO RELEASE INFORMATION

RELATED TO A RESIDENTIAL LEASE APPLICANT

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e, zip).
7, 4

I give my permission:

7133363698

brad.calame@garygreene.com

(1) to my current and former employers to release any information about my employment history and income history to the above-named person;

(phone)

- (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.