# 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: 18                            | 843 Torchiati LN  |               | New Caney                    | TX                   | 77357 |  |  |  |
|---|---|---------------|------------------------------|----------------------|-------|--|--|--|
| Anticipated: Move-in Dat                        | te: Month   | ly Rent: \$   | Security De                  | Security Deposit: \$ |       |  |  |  |
| Initial Lease Term Reque                        | ested: (mor   | nths)         |                              |                      |       |  |  |  |
| A. Applicant Identification:                    |   |               |                              |                      |       |  |  |  |
| Applicant's name (as liste<br>Applicant's forme | ed on proof of identification)<br>r last name (if applicable) |               |                              |                      |       |  |  |  |
| E-mail  | · · · · · · ·   |               | Mobile Ph.                   |                      |       |  |  |  |
| Work Ph   |   | Home Ph.      |                              |                      |       |  |  |  |
|   | ing text messages? 🛛 yes                                      | 🗆 no 🛛 Soc. S | Sec. No                      |                      |       |  |  |  |
| Driver License/ID No.                           |   | _ in          | <u>(</u> state)Date of Birth |                      |       |  |  |  |
| HeightWe  | eight   | _ Eye Color   | Hair Colo                    | or                   |       |  |  |  |

| 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 🛛 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:

#### C. Representation and Marketing:

| Is Applicant represented by a REALTOR® or other | r agent? 🛛 yes 🛯 no |
|---|---------------------|
| If yes, Name:                                   |                     |
| Company:  |                     |
| E-mail:   | Phone Number:       |
|   |                     |

Applicant was made aware of Property via: □ Sign □ Internet □ Other

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### **D.** Applicant Information:

## <u>Housing:</u>

| Applicant's Current Address:  |                                 |                      |                   | Apt. No.                                |
|---|---------------------------------|----------------------|-------------------|---|
| · · · _   |                                 |                      |                   | (city, state, zip)                      |
| Landlord or Property Manager's<br>Email:<br>Phone: <i>Day:</i><br>Move In Date:<br>Reason for move: | s Name:                         |                      |                   |   |
| Phone: <i>Day:</i>  | Nt:                             | Mb:                  | Fax:              |   |
| Move In Date:   | Move Out Date:                  |                      | Rent: \$          |   |
| Reason for move:  |                                 |                      |                   |   |
| Applicant's Previous Address  | S:                              |                      |                   | _Apt. No                                |
| Lenderd or Dreparty Managar's   | Neme                            |                      |                   | (city, state, zip)                      |
| Landlord or Property Manager's<br>Email:  |                                 |                      |                   |   |
| Email:<br>Phone: <i>Day:</i><br>Move In Date:<br>Reason for move:                                   | Nt:                             | Mb:                  | Fax:              |   |
| Move In Date:   | Move Out Date:                  |                      | Rent: \$          |   |
| Reason for move:  |                                 |                      |                   |   |
| Applicant's Current Employed<br>Address:<br>Employment Verification Contac                          | r:                              |                      |                   | (street, city, state, zip)              |
| Employment Verification Contac  | CT <u>:</u>                     |                      | Phone:            |   |
| Fax:E   | -mail:<br>Cross Monthly Income: | <u></u>              | Desition          |   |
| Note: If Applicant is self-employ   | Gross Monthly Income:           | ⊅<br>iro_ono_or_moro |                   | av raturn attacted by a                 |
| CPA, attorney, or oth   | her tax professional.           |                      |                   |   |
| Applicant's Previous Employ   |                                 |                      |                   | (street city state zin)                 |
| Employment Verification Contac  | ct:                             |                      | Phone:            | $\underline{(31001, 011)}, 31010, 210)$ |
| Fax: E  | -mail:                          |                      |                   |   |
| Address:<br>Employment Verification Contac<br>Fax: E-<br>Employed from to                           | Gross Month                     | ly Income: \$        | Positio           | on:                                     |
| Note: Applicant is responsible purposes.  | for including the appro         | opriate contact      | information for e | mployment verification                  |
| Describe other income Applicar  | nt wants considered:            |                      |                   |   |

| Emergency Contact: (Do <u>not</u> insert the name of an occupant or co-applicant.) |                        |           |  |  |  |  |  |  |
|--|------------------------|-----------|--|--|--|--|--|--|
| Name and Relat<br>Address:   | Name and Relationship: |           |  |  |  |  |  |  |
| City:  | State:                 | Zip Code: |  |  |  |  |  |  |
| Phone:   | E-mail:                |           |  |  |  |  |  |  |
|  |                        |           |  |  |  |  |  |  |

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#### 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<br>Type | e parked on the<br>Year | Property (cars,<br><u>Make</u> | trucks, boats,<br><u>Model</u> | trailers, motorcycles,<br>License Plate No./State | other types of vehicles):<br><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?

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

|              |             |              |        |                    |               |           |               | Rabies         | Assistance     |
|--------------|-------------|--------------|--------|--------------------|---------------|-----------|---------------|----------------|----------------|
| Type & Breed | <u>Name</u> | <u>Color</u> | Weight | <u>Age in Yrs.</u> | <u>Gender</u> | Neutered? | Bite History? | Shots Current? | <u>Animal?</u> |
|              |             |              | -      | -                  |               |           | ΩΥΩŇ          | ΩYΩN           | ΟYΟΝ           |
|              |             |              |        |                    |               |           |               |                | ΟYΟΝ           |
|              |             |              |        |                    |               |           |               |                | ΟYΟΝ           |
|              |             |              |        |                    |               |           |               | 🗆 Y 🗆 N        | I Y I 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).

#### H. Additional Information:

| Yes   | <u>No</u>    |  |
|-------|--------------|--|
|       |              | 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 A | pplicant eve | r:   |
| Yes   | No           |  |
|       |              | been evicted?  |

| 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. |
|  |

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| Yes | No |   |
|-----|----|---|
|     |    | Is any occupant a registered sex offender? If yes, provide the location, year, and type of conviction below.      |
|     |    | Has applicant had <u>any</u> credit problems, slow-pays or delinquencies? If yes, provide more information below. |

□ □ Is there additional information Applicant wants considered?

Additional comments:

#### 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 \$\_\_\_\_\_\_ to \_\_\_\_\_\_ (entity or individual) for processing and reviewing this application.

Applicant 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/initials) notified 🗖 Applicant                                 |
| <i>□</i>   | by | 🛛 phone | 🛯 mail 🖾 e-mail | 🛛 fax | $oldsymbol{\square}$ in person that Applicant was $oldsymbol{\square}$ |
| approved 🛯 not approved. Reason for disapproval: |    |         |                 |       |  |
|  |    |         |                 |       |  |

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\_ (e-mail)



# AUTHORIZATION TO RELEASE INFORMATION

RELATED TO A RESIDENTIAL LEASE APPLICANT

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| I,                      | (Applicant),          |                  |               |            |                              | have submitted an application |       |  |
|-------------------------|-----------------------|------------------|---------------|------------|------------------------------|-------------------------------|-------|--|
| to lease a property loo | cated at <u>18843</u> | Torchiati LN     |               |            | New Caney                    | тх                            | 77357 |  |
|                         |                       |                  |               |            | (address, city, state, zip). |                               |       |  |
| The landlord, broker,   | or landlord's rep     | presentative is: |               |            |                              |                               |       |  |
|                         | Feng Liu              |                  |               |            |                              |                               |       |  |
|                         | 15420 Ridge Park Dr   |                  |               |            | (address)                    |                               |       |  |
|                         | Houston               |                  |               | 77095-3324 | _(city, state, zip)          |                               |       |  |
| (28                     | (281)716-5501 (phone) |                  | (832)369-1766 |            | _ (fax)                      |                               |       |  |

twhomesale@gmail.com

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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