

RENTAL APPLICATION
Phone 817-891-4202 / Fax 817-419-6818

Name _____	Spouse _____
Current Street Address _____	
SS# _____	Spouse SS# _____
Phone # _____	Second # (cell) _____
Date of Birth _____	Spouse DOB _____
Driver Lic. # _____	Spouse DL # _____
Email _____	Email _____
Employer _____	Spouse Emp _____
Address: _____	Address _____
Phone _____	Phone _____
Occupation _____ How long _____	Occupation _____ How long _____
Income (gross) monthly: _____	Spouse Gross income monthly: _____
Additional Income: _____	Spouse Addtl income: _____

List your past 3 addresses, with landlord names and phone numbers

- (1) _____
- (2) _____
- (3) _____

please give two personal references with phone numbers:

- (1) _____
- (2) _____

Please list ALL persons (name and age) that will occupy the unit (Not including the above applicants):

Been arrested? ___ Convicted of felony/misdemeanor? ___ if yes, charge? _____
Been or being Evicted? ___ broken lease? ___ Explain: _____
Ever filed Bankruptcy? ___ Status? _____

Bank Checking ___ savings ___ Bank name _____ Phone # _____
account # _____ (only last 4 #s and how many #s, ex. XXXXXX1234)

I certify that the above information is correct and complete and hereby give authorization to make any inquiries necessary to evaluate the rental application, including credit, criminal, civil and eviction records, and rental history. I release all parties from liability of damages such inquiries may cause me. By placing my Holding Deposit in the amount of \$ _____ I understand this deposit is **non refundable** should I choose to **cancel** this application **regardless of result**. I understand that the Hold Deposit will become my security Deposit upon signing of a Lease Contract. I agree that my hold deposit only allows the unit to be held for **15 days from today**, my move in deadline is _____.

Applicant Signature _____

Spouse _____

Unit # _____ Move Date _____ Income _____ Criminal _____ Credit _____ Rental _____ Approval _____