

# RENTAL APPLICATION

(979) 696-4464 Office (979) 696-0234 Fax

*Our Privacy Policy Is Available To You Upon Request*

**Date:** \_\_\_\_\_ **Agent:** \_\_\_\_\_

The undersigned hereby makes application to rent

**(Address)** \_\_\_\_\_

## PLEASE TELL US ABOUT YOURSELF

FULL NAME \_\_\_\_\_ DL# \_\_\_\_\_ State \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Name of Spouse \_\_\_\_\_ DL# \_\_\_\_\_ State \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Number of Dependents (excluding Co-Applicant) \_\_\_\_\_ Phone # \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Other Occupants (relationship) \_\_\_\_\_  
Pets (Number and Kind) \_\_\_\_\_

## PLEASE GIVE YOUR RESIDENCE HISTORY FOR THE PAST 3 YEARS (Beginning With Most Current)

CURRENT ADDRESS \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Month & Year Moved In \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Owner or Agent \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
PREVIOUS ADDRESS (if within 3 years) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Month & Year Moved In \_\_\_\_\_ Moved Out \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Owner or Agent \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
PREVIOUS ADDRESS (if within 3 years) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Month & Year Moved In \_\_\_\_\_ Moved Out \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Owner or Agent \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

## (APPLICANT) PLEASE GIVE YOUR EMPLOYMENT INFORMATION

YOUR STATUS:  Employed Full-Time  Employed Part-Time  Student  Retired  Unemployed

CURRENT EMPLOYER: \_\_\_\_\_  
Dates(s) Employed \_\_\_\_\_ Employed as \_\_\_\_\_ Monthly Gross Income \$ \_\_\_\_\_  
Supervisor \_\_\_\_\_ Supervisor's Phone (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
PREVIOUS EMPLOYER: \_\_\_\_\_  
Dates(s) Employed \_\_\_\_\_ Employed as \_\_\_\_\_ Monthly Gross Income \$ \_\_\_\_\_  
Supervisor \_\_\_\_\_ Supervisor's Phone (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount \$ \_\_\_\_\_ Source \_\_\_\_\_

## (SPOUSE) PLEASE GIVE YOUR EMPLOYMENT INFORMATION

YOUR STATUS:  Employed Full-Time  Employed Part-Time  Student  Retired  Unemployed

CURRENT EMPLOYER: \_\_\_\_\_  
Dates(s) Employed \_\_\_\_\_ Employed as \_\_\_\_\_ Monthly Gross Income \$ \_\_\_\_\_  
Supervisor \_\_\_\_\_ Supervisor's Phone (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
PREVIOUS EMPLOYER: \_\_\_\_\_  
Dates(s) Employed \_\_\_\_\_ Employed as \_\_\_\_\_ Monthly Gross Income \$ \_\_\_\_\_  
Supervisor \_\_\_\_\_ Supervisor's Phone (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount \$ \_\_\_\_\_ Source \_\_\_\_\_

YOUR VEHICLE MAKE/MODEL \_\_\_\_\_ Year \_\_\_\_\_ Tag No. \_\_\_\_\_ State \_\_\_\_\_  
SECOND VEHICLE MAKE/MODEL \_\_\_\_\_ Year \_\_\_\_\_ Tag No. \_\_\_\_\_ State \_\_\_\_\_

OTHER VEHICLES \_\_\_\_\_

HAVE YOU EVER:      Filed for bankruptcy?     No     Yes    Been evicted from tenancy?     No     Yes  
Willfully or intentionally refused to pay rent when due?     No     Yes  
Ever been charged with or convicted of a criminal offense?  No     Yes  
Received deferred adjudication?  No     Yes

**Please give any additional information which might help management evaluate this application:**

\_\_\_\_\_  
\_\_\_\_\_

**If management has any questions about this application, please give PHONE NUMBERS where you can be located:**

DAY PHONE(S) \_\_\_\_\_

NIGHT PHONE(S) \_\_\_\_\_

CELL PHONE(S) \_\_\_\_\_

EMERGENCY CONTACT'S NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

**I RECOGNIZE THAT AS A PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, AN INVESTIGATIVE CONSUMER REPORT MAY BE PREPARED WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH MY NEIGHBORS, FRIENDS, AND OTHERS WITH WHOM I MAY BE ACQUAINTED. THIS INQUIRY INCLUDES INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING. I UNDERSTAND THAT I MAY HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME TO RECEIVE ADDITIONAL, DETAILED INFORMATION ABOUT THE NATURE AND SCOPE OF THIS INVESTIGATION.**

The above information, to the best of my knowledge, is true and correct.

Signature of Applicant \_\_\_\_\_ Date Signed \_\_\_\_\_

**APPLICANT: PLEASE DO NOT WRITE BELOW**

### Resident Verifications

Name \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Move/in Date \_\_\_\_\_ Move/out Date \_\_\_\_\_

Proper Notice Given .....yes/no  
Late Rents.....yes/no  
NSF .....yes/no  
Apt. Damage .....yes/no  
Unauthorized Pets .....yes/no  
Would you rent again .....yes/no  
Any Money Owed .....yes/no

Verified by \_\_\_\_\_ Comments: \_\_\_\_\_

### Employment Verifications

Name: \_\_\_\_\_

Present Employer: \_\_\_\_\_

Income: \_\_\_\_\_

How Long Employed: \_\_\_\_\_

Signature \_\_\_\_\_ Position \_\_\_\_\_

Please return to fax (979) 696-0234

Thank you for your cooperation!!! ---Equity

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_