



Sinclair Place | 4534 Sinclair Avenue, Midland, TX 79707 | 432-689-8115

# RENTAL APPLICATION

APPLICANT	NAME (APPLICANT)			EMAIL			
	ARE YOU A U.S. CITIZEN? YES <input type="checkbox"/> NO <input type="checkbox"/>		DATE OF BIRTH	SOCIAL SECURITY #		DRIVER'S LICENSE # & ISSUING STATE	
	PRESENT STREET ADDRESS			CITY	STATE	ZIP	
	FROM	TO	PHONE ( )	CELL PHONE ( )			
	LANDLORD NAME			PHONE ( )			
	LANDLORD STREET (OR APARTMENT NAME)			CITY	STATE	ZIP	
	FORMER STREET ADDRESS			CITY	STATE	ZIP	
	FROM	TO	FORMER LANDLORD	PHONE ( )			
	FORMER LANDLORD STREET (OR APT. NAME)			CITY	STATE	ZIP	
	OTHER STATES AND COUNTIES YOU HAVE LIVED IN:						
	PRESENT EMPLOYER:						
	STREET ADDRESS			CITY	STATE	ZIP	
	PHONE	POSITION		HOW LONG (DATE HIRED)			
	GROSS PAY \$	OTHER INCOME \$	SOURCE				
	PREVIOUS EMPLOYER						
	STREET ADDRESS			CITY	STATE	ZIP	
	PHONE	POSITION		HOW LONG (DATE HIRED)			
	REFERENCES	BANK (CHECKING)		BRANCH	PHONE ( )		ACCOUNT #
BANK (SAVINGS)		BRANCH	PHONE ( )		ACCOUNT #		
HAVE YOU ESTABLISHED RETAIL CREDIT?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		
LIST ALL OTHER OUTSTANDING DEBTS (Attach additional sheet if necessary)			BALANCE \$	MONTHLY PAYMENT \$			
RELATIVE/PARENT		ADDRESS			PHONE ( )		
PERSONAL REFERENCE		ADDRESS			PHONE ( )		
HAVE YOU EVER BEEN EVICTED?			DATE / /				
YES <input type="checkbox"/>		NO <input type="checkbox"/>					
HAVE YOU OR ANY OTHER PERSON WHO WILL BE OCCUPYING THE UNIT EVER BEEN CONVICTED OF, PLEAD GUILTY OR NO CONTEST TO ANY FELONY OR MISDEMEANOR?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	WHO	WHERE	WHEN	

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<b>OTHER</b>	OTHER OCCUPANTS (NAME):	DATE OF BIRTH	AUTOMOBILE/LICENSE#	PETS (SUBJECT TO APPROVAL BY MANAGEMENT)
			MAKE/MODEL/YEAR	NUMBER/TYPE:
			AUTOMOBILE/LICENSE#	DO YOU INTEND TO USE (CHECK IF YES):
			MAKE/MODEL/YEAR	WATERBED <input type="checkbox"/>
				MUSICAL INSTRUMENT <input type="checkbox"/>
				AQUARIUM <input type="checkbox"/>
<b>APPROVAL</b>	WHY ARE YOU VACATING YOUR PRESENT PLACE OF RESIDENCE? _____			
	HAVE YOU GIVEN LEGAL NOTICE WHERE YOU NOW LIVE? YES <input type="checkbox"/> NO <input type="checkbox"/>			
	HOW DID YOU HEAR ABOUT OUR PROPERTY? _____			
	I certify that the above information is correct and complete and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I/We understand that giving incomplete or false information is grounds for rejection of this application. If any information supplied on this application is later found to be false, this is grounds for termination of tenancy.			
	Applicant submits herewith a non-refundable payment in the amount of \$_____ for credit check and processing charge. If application is not approved said sum will be retained by management to cover the cost of processing this application. Landlord may obtain a consumer credit report and/or an investigative consumer report which may include the checking of the applicant's credit, income, employment, rental history, criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 606(b) of the Fair Credit Reporting Act, and a written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation. The name and address of the screening company or credit reporting agency is:			
	CoreLogic Saferent c/o Consumer Relations Department 7300 Westmore Road, Suite 3 Rockville, MD 20850-5223 Automated Request Phone #: 888-333-2413			
A good faith deposit in the amount of \$_____ is submitted with this application. If applicant is approved, this good faith deposit can be applied towards payments of the applicants security deposit of \$_____ and non refundable administrative fee of \$_____ both of which are due prior to taking possession of the apartment; and applicant agrees to execute managements usual rental agreement on or before the occupancy date set forth in this application. If for any reason management rejects the application, the good faith deposit submitted herewith will be refunded in full to the applicant.				
Applicant may cancel this application by written notice within 72 hours and receive a full refund of the good faith deposit. If applicant cancels this application after 72 hours or fails to execute managements usual rental agreement, or refuses to occupy the premises on the agreed upon date, the good faith deposit will be held until management can determine if it has incurred any expense or rent loss due to the cancellation.				
Apt # _____ Move in Date _____ Monthly Rent __\$_____ Photo ID Verified				
Applicant Signature _____		Applicant Signature _____		
Date _____		Date _____		
Managing Agent _____		Date & Time _____		
				