

## **Residential Lease Application**

Each occupant and co-applicant 18 years or older must submit a separate application.

Property Address: \_\_\_\_\_

Expected Move-In Date: \_\_\_\_\_\_ Monthly Rent: \_\_\_\_\_\_

Security Deposit: \$ \_\_\_\_\_

| Applicant Information                   |                            |  |               |                       |      |  |  |  |
|---|----------------------------|--|---------------|-----------------------|------|--|--|--|
| Name (first, middle, last):             |                            |  |               |                       |      |  |  |  |
| Email:                                  |                            | Phone:   |               |                       |      |  |  |  |
| Date of birth:                          | SSN:                       |  | Driver        | Driver License No.    |      |  |  |  |
| Current address:                        |                            |  |               |                       |      |  |  |  |
| City:                                   |                            | State:   |               | ZIP Co                | ode: |  |  |  |
| □ Own □ Rent (check one)                | Monthly paym               | Monthly payment or rent: Date Moved-In:                |               |                       |      |  |  |  |
| Landlord or Property Manager's Name:    |                            |  |               |                       |      |  |  |  |
| Email:                                  |                            |  | Phone:        |                       |      |  |  |  |
| Reason For Move:                        |                            |  |               |                       |      |  |  |  |
| Previous address:                       |                            |  |               |                       |      |  |  |  |
| City:                                   |                            | State:   |               | ZIP Co                | le:  |  |  |  |
| □ Own □ Rent (check one)                | Monthly paym               | onthly payment or rent: Date Moved-In: Date Moved-Out: |               |                       |      |  |  |  |
| Landlord or Property Manager's Name:    |                            |  |               |                       |      |  |  |  |
| Email:                                  |                            | Phone:   |               |                       |      |  |  |  |
| Reason For Move:                        |                            |  |               |                       |      |  |  |  |
| Employment Information                  |                            |  |               |                       |      |  |  |  |
| Current Employer:                       |                            |  |               |                       |      |  |  |  |
| Address:                                |                            |  |               |                       |      |  |  |  |
| City:                                   |                            | State:   |               | ZIP Co                | le:  |  |  |  |
| Supervisor's Name                       | visor's Name Phone: Email: |  |               |                       |      |  |  |  |
| Start Date:                             | Position:                  |  | / Income:     |                       |      |  |  |  |
| Previous Employer:                      |                            |  |               |                       |      |  |  |  |
| Address:                                |                            |  |               |                       |      |  |  |  |
| City:                                   | zy: State: ZIP Code:       |  |               |                       | le:  |  |  |  |
| Supervisor's Name Phone: Email:         |                            |  |               |                       |      |  |  |  |
| Employed From / / to / / Position:      |                            |  |               | Gross Monthly Income: |      |  |  |  |
| Describe Other Income Applicants Wants  | s Considered:              |  |               |                       |      |  |  |  |
| Emergency Contact                       |                            |  |               |                       |      |  |  |  |
| Name of a person not residing with you: |                            |  |               |                       |      |  |  |  |
| Address:                                |                            |  |               |                       |      |  |  |  |
| City:                                   |                            | State:   | ze: ZIP Code: |                       |      |  |  |  |
| Phone:                                  | Email:                     |  |               |                       |      |  |  |  |
| Relationship:                           |                            | •  |               |                       |      |  |  |  |

| Name all o   | other perso  | ons who       | will occ      | upy the Prop      | erty.    |  |  |              |             |           |             |                                  |
|--|--|---------------|---------------|-------------------|----------|--|--|--------------|-------------|-----------|-------------|----------------------------------|
| Name:  | Name: Relationship:                                    |               |               |                   |          |  |  | Age:         |             |           |             |                                  |
| Name: Relationship:  |  |               |               |                   |          |  |  | Age:         | Age:        |           |             |                                  |
| Name: Relationship:  |  |               |               | Α                 |          |  |  | Age:         | Age:        |           |             |                                  |
| Name:  |  |               |               | Relations         | hip:     |  |  |              |             | Age:      |             |                                  |
| Automobi   | les  |               |               |                   |          |  |  |              |             |           |             |                                  |
| List All Vehicle   | es to be parked  | on the Prope  | erty.         |                   |          |  |  |              |             |           |             |                                  |
| <u>Type</u>  | <u>Year</u>  | Make          |               | Mo                | Model    |  | License/State                          |              |             |           |             | <u>Monthly</u><br><u>Payment</u> |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
| Pets   | L  |               |               | L.                |          |  |  |              |             |           |             |                                  |
| Requires a No  | n-Refundable P   | Pet Fee and N | lust Be App   | proved By The Hor | neowner. |  |  |              | Any         | Pets?     | □ Yes       | 5 🗆 No                           |
| Breed  | Age Weig   |               | <u>Weight</u> |                   | Gender   |  |  |              | <u> </u>    |           | <u>Name</u> |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
| Questionr  | naire  |               |               |                   |          |  |  |              |             |           |             |                                  |
| Does anyone v  | who will occupy  | the property  | y smoke?      |                   |          | ΠY                                     | ′es                                    | D No         | If Yes, Exp | lain in J | Additio     | nal Comments                     |
| Has applicant ever been evicted or had an eviction notice served on him/her?     |  |               | ΠY            | ′es               | 🗆 No     | If Yes, Explain in Additional Comments |  |              |             |           |             |                                  |
| Has applicant  | Has applicant ever broken a lease or rental agreement? |               | ΠY            | ′es               | 🗆 No     | If Yes, Explain in Additional Comm     |  | nal Comments |             |           |             |                                  |
| Has applicant ever filed for bankruptcy?   |  |               |               | ΠY                | ′es      | D No                                   | If Yes, Explain in Additional Comments |              |             |           |             |                                  |
| Has applicant ever willfully and intentionally refused to pay any rent when due? |  |               | ΠY            | ′es               | D No     | If Yes, Explain in Additional Comments |  |              |             |           |             |                                  |
| Is any occupant a registered sex offender?                                       |  |               | ΠY            | ′es               | D No     | If Yes, Explain in Additional Comments |  |              |             |           |             |                                  |
| Are there any criminal matters pending against any occupant?                     |  |               | ΠY            | ′es               | 🛛 No     | If Yes, Explain in Additional Comments |  |              |             |           |             |                                  |
| Does applicant have a checking account?  |  |               | ΠY            | ′es               | D No     | If No, Explain in Additional Comments  |  |              |             |           |             |                                  |
| Is the total mo  | ve-in amount a   | available now | ?             |                   |          | ΠY                                     | ′es                                    | D No         | If No, Expl | ain in A  | ddition     | al Comments                      |
| Additiona  | l Comment  | ts            |               |                   |          |  |  |              |             |           |             |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |
|  |  |               |               |                   |          |  |  |              |             |           |             |                                  |

**AUTHORIZATION:** Applicant represents that the statements in this application are true and complete, and hereby, authorizes Landlord and/or Landlord's Representative, 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.

Applicant understands that providing inaccurate or incomplete information is grounds for rejection of the application and forfeiture of any application fee and may be grounds to declare Applicant in breach of any lease the Applicant may sign.

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.

Applicant's Signature



١, \_

\_\_(Applicant), have submitted an

application to a property located at \_\_\_\_

\_(address, city, state, zip).

The Landlord or Landlord's Representative is:

| NaTarrio Jones                       |
|--------------------------------------|
| 2925 Gulf Freeway South Suite B #232 |
| League City, TX 77573                |
| 832.821.6517                         |
| natarrio.jones@j1sproperties.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 abovenamed 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



- Application fee is **\$40 per applicant** and is **NON-REFUNDABLE**. Cashier's check, money order or cash only.
- Application will **NOT** be processed until application fee is received as well as **verification of identity and supporting documentation**.
- Approved applicant is required to sign a rental agreement and pay the security deposit within 48 hours of approval (or receipt of lease to be signed). Any other applications could be received and approved if rental agreement is not signed within the specified timeframe.
- Minimum Gross monthly income must be equal or greater than 3 times the rental amount.
- Applicants with a credit score **below 550** require an **additional security deposit** and/or **co-signer** and MUST be approved by the homeowner.
- Applicants will be **DENIED** for the following:
  - Any Felonies
  - Any sexual related offenses
  - Any prior evictions

## **Pet Requirements:**

- Pet fee is **\$300** per pet and is **NON-REFUNDABLE**.
- Maximum of **2 pets allowed**
- 25 lb. weight limit Fully Grown

## ADDITIONAL SECURITY DEPOSIT AND/OR CO-SIGNER IS REQUIRED FOR WAIVER OF ANY SELECTION CRITERIA AND MUST BE APPROVED BY THE HOMEOWNER.

All pages of this application must be signed, dated, and submitted with the following supporting documents:

Social Security Card

U.S. Driver's License

And

2 Most recent check stubs or

Letter of acceptance from new employer Proof of additional income

If applicable, submit

Bank Statements (if requested) Court Decree and proof of deposits for Child Support or Alimony Government documents to support Social Security Check stubs to support receiving Social Security

Security deposit must be paid with a **SEPARATE cashier's check** at the time of **lease signing**. First month's rent or pro-rated rent due **BEFORE** tenant takes **possession** of the property.