

**RESIDENTIAL RENTAL APPLICATION**

**Landlord**

Landlord Name: Blake Freeman Construction, LLC

Address: PO BOX 23, Godley, TX 76044

Phone: (817) 389-2584

**Rental Property Information**

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

The term of the lease will be a fixed term starting on \_\_\_\_\_ and ending on \_\_\_\_\_. Possession Date: \_\_\_\_\_

Monthly Rent Payment: \$ \_\_\_\_\_

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

Non Refundable Pet Deposit: \$ \_\_\_\_\_

Pro-Rated Rent For April: \$ \_\_\_\_\_

Total Due at Rental Agreement Signing: \$ \_\_\_\_\_

Total Due at Time of Move In: \$ \_\_\_\_\_

**Applicants' Personal Information**

Applicant's Name: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternative Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address (Optional): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Applicant's Social Security Number: \_\_\_\_\_

Second Applicant's Name: \_\_\_\_\_  
Second Applicant's Date of Birth: \_\_\_\_\_  
Second Applicant's Social Security Number: \_\_\_\_\_

Third Applicant's Name: \_\_\_\_\_  
Third Applicant's Date of Birth: \_\_\_\_\_  
Third Applicant's Social Security Number: \_\_\_\_\_

Name(s) of Dependent(s): _____	Date(s) of Birth: _____
_____	_____
_____	_____
_____	_____
_____	_____

Do you have a pet? Yes / No If more than one, how many? \_\_\_\_\_

Please describe type(s) of pet(s):

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

**Residential History**

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Previous Address 1: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Previous Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**Details of Employment**

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

Position: \_\_\_\_\_ Date Hired: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Salary: \_\_\_\_\_

(If employed less than one year with present employer, please provide previous employer.)

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

Position: \_\_\_\_\_ Date Hired: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Salary: \_\_\_\_\_

**Other Sources of Income**

Do you receive income from any of the following sources? Yes / No

Student Loans \_\_\_\_\_ Pension Benefits \_\_\_\_\_ Social Assistance \_\_\_\_\_ Other \_\_\_\_\_

Please provide contact persons who could verify the amount of additional income you receive:

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

**Vehicle Information**

Make / Model: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Make / Model: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Parking stall required? Yes / No    Additional stall required? Yes / No (Subject to availability)

**Banking Information**

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

(If you bank with more than one institution, please list second bank below)

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**References**

Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**Emergency Contact**

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

Relationship: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**Criminal & Credit Background Check Authorization**

Is there anything negative that we may find in our criminal or credit background check that you want to comment on?

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I declare that the information I have provided is accurate. I authorize the individual or organization to whom this application is submitted to: (a) contact my references and all other persons that I have named in this application; and (b) perform a credit and/or criminal check to assess my suitability as a tenant/lessee.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_