Received on	(	date	) at	(time)	)

# TEXAS REALTORS

#### RESIDENTIAL LEASE APPLICATION

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

Monthly Rent: \$ (months)	Sec	urity Deposit: \$	
as not viewed the P	roperty in-person pric	or to submitting this a	application.
view the Proper	hu in noroon prior	to outpoitting on	annlication
warranties as to the	ne Property's conditi	ion. Applicant requ	ests Landlord
			,
(	(-6)		(a
ther	(pnone)		(e-mail)
no <i>If yes, co-a</i> niden or married)	pplicant must submit a	separate application.	
Мо	bile/Pager		
Driver License I	No	in	(state)
eight	_ Weight	Eye Color	
status			
name of an occupa	nt or co-applicant.)		
S	tate:	Zin Code:	
E-mail:			
	Relationship:	Ag	e:
	Relationship:	Aα	۵,
	Relationship:	Ag	e:
	Relationship:	Ag	e:
			(city, state, zip)
9;	En	nail:	
Maya Out Date	MD:		
_ iviove-Out Date _		_ rent \$	99448-444-444-44-4-4-4-4-4-4-4-4-4-4-4-4
			Page 1 of 4
	as not viewed the Propert warranties as to the treatments shape of an occupation of an occupation of the Property:	as not viewed the Property in-person prior warranties as to the Property's condition treatments should Applicant as a iden or married)	as not viewed the Property in-person prior to submitting this a view the Property in-person prior to submitting any warranties as to the Property's condition. Applicant require treatments should Applicant and Landlord er treatments should Applicant a separate application.

Residential Lease Application co	ncerning			
Applicant's Previous Addr	ress:		Apt.	No
Landland on Donas and A			Email:Fax:	(city, state, zip)
Landiord or Property iv	lanagers Name:		Email:	
Phone: Day:	Nt:	Mb:	Fax:	
Date Moved-In	Move-O	ut Date	Rent \$	
Reason for move:				
Applicant's Current Emplo	oyer:			
Address:			(st	reet, city, state, zip)
Employment Verification	on Contact:		Phone:	
Fax:	E-mail:			
Start Date:	Gross Monthly Inc	ome: \$	Position:	
Note: If Applicant is	self-employed I andlord	may require one	or more previous year's ta	ax return attested
by a CPA, atto	rney, or other tax profes	sional.		in rotam attoolog
Address:	loyer:		/ot	root situ state zin
Employment Verification	on Contact:		(sti	eet, city, state, zip)
Employment vernication	F-mail:		Frione.	
Employed from	to Gra	see Monthly Income	e: \$Position	
Note: Applicant is re	spansible for including the	os appropriate cor	ntact information for emplo	umont varification
purposes.	sponsible for including th	е арргорнате соп	itadi ililormation for emplo	yment vermeation
• •				
List all vehicles to be park  Type Ye	ed on the Property:  Make	Model	License Plate No./State	Mo. Payment
If yes, list all animals to be	e kept on the Property:			ies Assistance
Type & Breed Name	Color Weight Age in		eutered?         Bite History?         Shots C           Y N Y N Y         Y N Y           Y N Y N Y         Y N Y           Y N Y N Y         Y N Y	Animal?           N         Y         N           N         Y         N           N         Y         N           N         Y         N           N         Y         N
If any of the animals listereasonable accommodation			provide appropriate docu	mentation with a
Doe Will Is A	any waterbeds or water es anyone who will occup Applicant maintain rente applicant or Applicant's s If yes, is the military pers one year or less?	by the Property smer's insurance? Soouse, even if sep	noke?	person's stay to

Residential Lease Application concerning						
	as Applicant ever: been evicted? been asked to move out by a landlord? breached a lease or rental agreement? filed for bankruptcy? lost property in a foreclosure? been convicted of a crime? If yes, provide the location, year, and type of conviction below. any occupant a registered sex offender? If yes, provide the location, year, and type of proviction below. and any credit problems, slow-pays or delinquencies? If yes, provide more information below. there additional information Applicant wants considered?					
Additional comments:						
tenancy, to: (1) obtain a copy of (2) obtain a criminal (3) verify any rental	Applicant's credit report; background check related to Applicant and any occupant; and or employment history or verify any other information related to this application with legeable of such information.					
Notice of Landlord's R separate written agreem	Right to Continue to Show the Property: Unless Landlord and Applicant enter into a nent otherwise, the Property remains on the market until a lease is signed by all parties nue to show the Property to other prospective tenants and accept another offer.					
Privacy Policy: Landlord	l's agent or property manager maintains a privacy policy that is available upon request.					
	to AIM REALY INC.  cocessing and reviewing this application. Applicant submits x will not submit an application to be applied to the security deposit upon execution of a lease or returned to t executed.					
selection criteria, as criminal histor (2) Applicant unders application and f any lease the Ap (3) Applicant represe	lication indicates that Applicant has had the opportunity to review Landlord's tenant which is available upon request. The tenant selection criteria may include factors such y, credit history, current income and rental history. tands that providing inaccurate or incomplete information is grounds for rejection of this orfeiture of any application fee and may be grounds to declare Applicant in breach of					
Applicant's Signature	Date					
For Landlord's Use:						
On	by phone mail e-mail fax in person that Applicant was ed. Reason for disapproval:					

(TXR-2003) 07-08-22

request.

# TEXAS REALTORS

# AUTHORIZATION TO RELEASE INFORMATION RELATED TO A RESIDENTIAL LEASE APPLICANT

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	(address, city, state, zip).
The landlord, broker, or landlord's representative is:	
AIM REALTY INC.	(name)
14417 CORNERSTONE VILLAGE DR.	(address)
HOUSTON, TX. 77014	(city, state, zip)
(281)440-4418 EXT.201 (phone) (281)440-4619	(fax)
normajean@aimrealtymanagement.com	(e-mail)
I give my permission:	
<ol> <li>to my current and former employers to release any information about r history to the above-named person;</li> </ol>	my employment history and income
<ul><li>(2) to my current and former landlords to release any information about my person;</li></ul>	y rental history to the above-named
(3) to my current and former mortgage lenders on property that I ow information about my mortgage payment history to the above-named	
<ul><li>(4) to my bank, savings and loan, or credit union to provide a verification the above-named person; and</li></ul>	of funds that I have on deposit to
(5) to the above-named person to obtain a copy of my consumer report reporting agency and to obtain background information about me.	(credit report) from any consumer

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of the information described in this authorization. The broker maintains a privacy policy which is available upon



### TENANT AND OCCUPANT INFORMATION

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A. Please list the Tenants fro	om the above-referenced lea	ise:	
Name (first, middle, last)		Ag Mobile	je:
E-mail	Home Phone	Mobile	
Driver License No.	in	(state) Height	t
E-mail	Social Security/TIN	Marital St	atus
Name (first, middle, last)		Ag	e:
E-mail	Home Phone	Mobile	
Driver License No.	inin	(state) Height	:
Name (first, middle, last) E-mail Driver License No Date of Birth	Social Security/TIN	Marital St	atus
Name (first, middle, last)		Ag	e:
E-mail	Home Phone	Mobile	
Driver License No.	in	( <i>state</i> ) Height	
Date of Birth	Social Security/TIN	Marital St	atus
Name (first, middle, last)		Ag	e:
E-mail	Home Phone	Mobile	
Driver License No	inin	(state) Height	
Name (first, middle, last) E-mail Driver License No Date of Birth	Social Security/TIN	Marital St	atus
B. Please list any other Occu Name (first, middle, last) E-mail			
Name (first, middle, last) E-mail Driver License No Date of Birth	in Height	( <i>state</i> ) Marital Status	
Name (first, middle, last)	Home Phone	Ag Mobile	
Name (first, middle, last) E-mail	Home Phone	Ag Mobile	
Driver License No.  Date of Birth  Name (first, middle, last)  E-mail  Driver License No.  Date of Birth	Home Phone in		e:
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Fax: (281)440-3571

	ast)	Jome Phone			Mobile	Age
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E-mail		lome Phone			Mobile	
Name (first, middle, la Date of Birth E-mail Driver License No			in		(state)	
D. Please list any au  Type: Color: Spayed/Neutered			-		•	
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Spayed/Neutered	ryesno R	anies silois (	Junenty	es [] no	Assistant	e animal? yes
Type: Color:	Bree	d:		NaNa	me:	
Color:	Weight:		Age	e:	Gend	er:
Spayed/Neutered?	? ☐ yes ☐ no Ra	abies Shots (	Current _ y	es no	Assistanc	e animal? yes
Type:	Bree	d:		Na	me:	
Color:	Weight:	***************************************	Age	e:	Gend	er:
Type: Color: Spayed/Neutered?	?	abies Shots C	Current y	es no	Assistanc	e animal? yes
E. Emergency Cont Name and Relationsh Address: City:	ip:					
Phone:		E-mail				
F. Privacy Policy: Land request.  Note: This form is info					vacy polic	y that is available u
ınt		Date	Tenant			Di



#### **RESIDENTIAL LEASE SIGHT UNSEEN ADDENDUM**

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Αľ	ADDENDUM TO RESIDENTIAL LEASE CONCERNING THE PROPERTY AT						
Α.	VIEWING OF PROPERTY: Tenant view apply.)  Tenant viewed the Property on Tenant's representative viewed Tenant's representative perfor system, including but not limite Tenant has not viewed the ProOther:	line throug I the Prope med a vir d to, Face perty throu	h pictures, videos, or a 3-Di erty on the Tenant's behalf; tual showing of the Proper Fime, Zoom, WhatsApp, etc gh any method; or	mensional tour; ty through video-conferencing .;			
В.	SIGHT UNSEEN NOTICE: Tenant is lease. A Tenant who declines to do so so at their own risk. Tenant accepts the changes upon Tenant viewing the Proof Tenant viewing the Property before  The undersigned Tenant acknowledge.	o and choo he Propert perty. Tena signing the	oses to sign the Lease on the y "as is" and Landlord is un ant will be bound to all proving Lease.	he Property sight unseen does nder no obligation to make any			
Lar	ndlord	Date	Tenant	Date			
Lar	ndlord	Date	Tenant	Date			
agr	signed for Landlord under written property eement or power of attorney:		t Tenant	Date			
			Tenant	Date			
	nted Name:						
Firr	n Name:						

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