

Vance J. Elliott Realty Group

1330 Aquarena Springs Dr. #105 San Marcos, TX 78666

(512) 353-3002 Fax (512) 353-3394

Rental Application for Residents

Your Information

Full Name (as is on driver license) _____

Address (as is on driver license) _____

Driver License # _____

Social Security Number _____

D.O.B: _____ Sex: _____ Eye Color: _____

Weight: _____ Hair Color: _____ Height: _____

Marital Status: single married divorced separated

Are you a U.S. citizen? yes no

Do you or any occupant smoke? _____

Will you or any occupant have an animal? _____

Current Address: _____

City/State/Zip: _____

Home/Cell Phone: _____

Email Address: _____

Current Landlord of Manager: _____

Their Phone: _____ Date Moved In: _____

Why are you leaving? _____

Occupation

Present Employer: _____

Address: _____

City/State/Zip: _____

Work Phone: _____

Supervisor's Name and Phone: _____

Position: _____

Gross Monthly Income: _____

Your Credit History

Your bank's name, city, state: _____

List major credit cards: _____

Other non-work income you want considered.

Please explain: _____

Your Rental/Criminal History

Check only if applicable.

Have you, your spouse, or any occupant listed in this Application ever: been evicted or asked to move out? moved out of a dwelling before the end of the lease term without the owner's consent? declared bankruptcy? been sued for rent? been sued for property damage? been charged, detained, or arrested for a felony or sex crime that was resolved by conviction, probation, deferred adjudication, court ordered community supervision, or pretrial diversion? been charged, detained, or arrested for a felony or sex-related crime that has not been resolved by any method?

Spouse Information

Full Name: _____

Former Last Names: _____

Social Security Number: _____

Driver License #: _____

D.O.B: _____ Sex: _____

Are you a U.S. citizen? _____

Present Employer: _____

Address: _____

City/State/Zip: _____

Work Phone: _____

Position: _____

Other Occupants

Anyone who is under the age of 18 and other adults who will live in the unit without signing the lease.

Name: _____ Relationship: _____

Sex: _____ D.O.B _____

SSN: _____ DL#: _____

Name: _____ Relationship: _____

Sex: _____ D.O.B _____

SSN: _____ DL#: _____

Name: _____ Relationship: _____

Sex: _____ D.O.B _____

SSN: _____ DL#: _____

How Did You Hear About Us?

Were you referred? _____

Name of locator or rental agency: _____

Name of individual locator or agent: _____

Name of friend or other person: _____

Did you find us on your own? _____

Authorization

You declare that all your statements

on this page of this application are true and complete.

Applicant's Signature

Spouse's Signature