1912 W. Main St. Houston, Texas 77098 (713) 529-8000 - Office (713) 298-2179 - Cell

Email completed application to: <u>properties@littlepagebooth.com</u> <u>www.littlepageproperties.com</u>

Zelle payments: <u>alejandra@littlepagebooth.com</u> – Zoe Littlepage

## **RENTAL APPLICATION**

\$35.00 Fee (non-refundable)

(Each	applicant or co-applicant must comple	te a separate application)		
Prope	erty Address:		<del> </del>	
Move - in Date:		Monthly Rental Rate:	\$	
Security Deposit: \$		Term of Lease:		
1.	Name: Telephone Number (Hm): Cell:	(Wk): _D.O.B:		
	Email:Soc. Sec. No.:Military Service Member:	_ Driver License No.:		
		(Please include co	opy of your ID	
2.	Name of Present Landlord or Apt. Mail Landlord's Phone (Hm):  Present Monthly Rent: \$	nager: (Wk):		
	Move-in Date:  Applicant's Present Street Address:	Move-out Date:		
	City, State, Zip Code:			
3.	Name of Immediate Prior Landlord or Apt. Manager (if less than 2 years)			
	Landlord's Phone (Hm): Amount of Monthly Rent: \$	Email:		

l JIIV	, State, Zip Code:			
Oity,				
_		Di		
⊨mp	oloyer:	Phone:		
	ail:Title/Positi			
Addı	ress:			
City,	, State, Zip Code:			
l itle -	/Position:			
Des	cribe your job:			
	gth of Employment:			
Sup	ervisor's Name:	Phone:		
	(Please provide	e copies of at least 2 pays		
Name of Immediate Prior Employer (if less than 2 years)				
 Addı	ress:			
City,	, State, Zip Code:			
	/Position:			
Title	,			
Title	gth of Employment:	Monthly Income: \$		
Title Lenç Sup Iame	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant)	Monthly Income: \$ Phone: to occupy the Property and their		
Title Lenç Supe	gth of Employment:ervisor's Name:	Monthly Income: \$ Phone: to occupy the Property and their		
Title Lenç Supo ame relat	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant)	Monthly Income: \$ Phone: to occupy the Property and their		
Title Leng Supe lame relat List	gth of Employment: ervisor's Name: e(s) of all persons (other than applicant) tionship to Applicant: all vehicles to be parked on the Property	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational		
Title Leng Super lame relat List vehi	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant:eall vehicles to be parked on the Property cles, motorcycles, boats, etc.)	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational		
Title Lenç Supe lame relat List vehi Mak Colc	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant:eall vehicles to be parked on the Property cles, motorcycles, boats, etc.)	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational License No./State		
Title Leng Sup lame relat List vehi Mak Colc Mak	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant:eall vehicles to be parked on the Property cles, motorcycles, boats, etc.)  The first property of the prope	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational License No./State		
Title Lenç Supe lame relat  List vehic Colc Mak Colc	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant:eall vehicles to be parked on the Property cles, motorcycles, boats, etc.)  the Year Modelee Year Model	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational  License No./State  License No./State		
Title Lenç Supe lame relat  List vehic Mak Colc Mak Colc	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant:eall vehicles to be parked on the Property cles, motorcycles, boats, etc.)  e Year Model e Year Model or any pets be on the Property? Yes	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational  License No./State  License No./State  No		
Title Lenç Supe lame relat List Vehi Mak Colc Mak Colc Will	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant:eall vehicles to be parked on the Property cles, motorcycles, boats, etc.)  ### Year Model  ### Year Model  ### Or  any pets be on the Property? Yes  Kind: Weight:	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational  License No./State  License No./State  No  Breed: Age:		
Title Lenç Supe lame relat List Vehi Mak Colc Mak Colc Will	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant: all vehicles to be parked on the Property cles, motorcycles, boats, etc.)  e Year Model or any pets be on the Property? Yes Kind: Weight: Declawed: Neutered:	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational License No./State License No./State No No Age: Indoor or Outdoor: Indoor or Outdoor:		
Title Leng Supo lame relat List Wehi Mak Colc Mak Colc	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant:eall vehicles to be parked on the Property cles, motorcycles, boats, etc.)  The second Year Modelee Year Model Year Yea	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational License No./State License No./State No No Age: Indoor or Outdoor: Name: Rabies shot: Name: Rabies shot: No Rabies shot: Name: Rabies shot: No Rabies shot: Name: Rabies shot: Rabies shot: Rabies shot: Rabies shot: Rabies shot:		
Title Leng Supo amerelat List Vehi Mak Colc Mak Colc Will a.	gth of Employment:ervisor's Name:e(s) of all persons (other than applicant) tionship to Applicant: all vehicles to be parked on the Property cles, motorcycles, boats, etc.)  e Year Model or any pets be on the Property? Yes Kind: Weight: Declawed: Neutered:	Monthly Income: \$ Phone: to occupy the Property and their  y (cars, trucks, trailers, recreational  License No./State  License No./State  No  Breed: Age: Indoor or Outdoor: Name: Rabies shot: Breed: Age:		

	Phone (Hm):(Wk)				
	Fax:				
	Address:				
	City, State, Zip Code:				
10.	Write Yes (Y) or No (N)				
	Will any waterbeds be in the Property?	YES:	NO:		
	Will Applicant maintain a renter's insurance policy? Has Applicant or any other occupant ever:	YES:	_ NO:		
	been evicted?	YES:	NO:		
	filed bankruptcy?	YES:			
	lost property due to foreclosure?	YES:			
	have any credit problems?	YES:			
	been convicted of a felony?	YES:	_ NO:		
	answer to any of the above questions is Yes, explain ssary)	•			
11.	In case of emergency, notify: Phone: Email:				
	Address:				
	City, State, Zip Code:				

Providing false information in this application is grounds for rejection of this application. The undersigned represents that the above statements are true and complete and hereby authorizes verification of said information.

If approved, applicant must submit deposit payment on same day application is approved.

RENTAL AND EMPLOYMENT HISTORY, AND OBTAIN OTHER INFORMATION RELATO THIS APPLICATION.				
Signature of Applicant	Date			
Printed Name				

APPLICANT AUTHORIZES LANDLORD OR LANDLORD'S AGENT TO OBTAIN A COPY OF