

OKLAHOMA REAL ESTATE COMMISSION

OFFICE USE ONLY

Applicant Name (Last, First)

Best phone number

Best email

RESIDENTIAL LEASE APPLICATION

Section 1. Rental Property/Lease Information

Property Address: _____

Lease Start Date: _____ Lease End Date: _____

Rent Amount \$ _____ payable in certified funds before or at time of possession.

Security Deposit \$ _____ payable in certified funds upon approval of application or to be prepaid in advance by certified funds, shall not be refunded if application is approved and applicant fails to execute a lease and take possession of the subject property. Prepaid security deposit shall be refunded if application is not approved.

_____ Deposit \$ _____ payable in certified funds upon approval of application.

Processing Fee. The Application and Credit Check Processing Fee is \$ _____ for each credit report, payable in cash, certified funds at time of application. Employment, personal references, credit records, public records, current and previous property landlords' references and criminal records may be checked as part of the processing of the application. This Processing Fee is NOT REFUNDABLE.

Upon approval of application, applicant has the right to receive a copy of the lease for review for _____ days (3 days if left blank) before they are required to sign.

NOTICE: The above Property is offered for lease without regard to sex, race, religion, color, handicap, familial status, age or national origin.

Section 2. Applicant Information (A copy of photo identification for all applicants must be submitted with this application)

Applicant

Name: _____ (First, Middle, Last)

Soc. Sec. #: _____ - _____ - _____ Date of Birth: _____

Best Phone #: _____ Work#: _____ Cell #: _____

Email: _____ Drivers Lic. #: _____ Photo ID: _____ Yes _____ No

In Case of Emergency or Death (pursuant to Title 41 O.S. §130.1A) notification is to be made to:

Name: _____ Phone: _____ Alt. Phone: _____

Must not be a co-applicant or someone who will be residing in the residence with you.

Address: _____ Relationship: _____

Present Address Information

Is present Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

Previous Address Information

Was Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

RESIDENTIAL LEASE APPLICATION (continued)

Employment History

| | |
|---|---|
| Current Employer: _____ | Previous Employer: _____ |
| Position: _____ | Position: _____ |
| Address: _____ | Address: _____ |
| City: _____ State: _____ Zip: _____ | City: _____ State: _____ Zip: _____ |
| How Long: _____ Gross Monthly Income: _____ | How Long: _____ Gross Monthly Income: _____ |
| Supervisor: _____ Phone #: _____ | Supervisor: _____ Phone #: _____ |
| Other Income: _____ Source: _____ | |
| Do you have a checking/savings account? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes what bank? _____ | |
| Have you ever: | |
| Filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes date of discharge? _____ | |
| Been evicted? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |
| Broken a lease? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |
| Been convicted of a felony/misdemeanor? <input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ | |
| Been sued for nonpayment of rent? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |
| Been sued for damage to rental property? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |

Section 3. Co-Applicant Information (A copy of photo identification for all applicants must be submitted with this application)

Applicant

Name: _____
(First, Middle, Last)

Soc. Sec. #: _____ - _____ - _____ Date of Birth: _____

Best Phone #: _____ Work#: _____ Cell #: _____

Email: _____ Drivers Lic. #: _____ Photo ID: Yes No

In Case of Emergency or Death (pursuant to Title 41 O.S. §130.1A) notification is to be made to:

Name: _____ Phone: _____ Alt. Phone: _____
Must not be a co-applicant or someone who will be residing in the residence with you.

Address: _____ Relationship: _____

Present Address Information

Is present Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

Previous Address Information

Was Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

RESIDENTIAL LEASE APPLICATION (continued)

Employment History

| | |
|---|---|
| Current Employer: _____ | Previous Employer: _____ |
| Position: _____ | Position: _____ |
| Address: _____ | Address: _____ |
| City: _____ State: _____ Zip: _____ | City: _____ State: _____ Zip: _____ |
| How Long: _____ Gross Monthly Income: _____ | How Long: _____ Gross Monthly Income: _____ |
| Supervisor: _____ Phone #: _____ | Supervisor: _____ Phone #: _____ |
| Other Income: _____ Source: _____ | |
| Do you have a checking/savings account? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes what bank? _____ | |
| Have you ever: | |
| Filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes date of discharge? _____ | |
| Been evicted? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |
| Broken a lease? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |
| Been convicted of a felony/misdemeanor? <input type="checkbox"/> No <input type="checkbox"/> Yes, for _____ | |
| Been sued for nonpayment of rent? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |
| Been sued for damage to rental property? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____ | |

Section 4. Other Information

Occupant Information

List name, ages, and relationship of occupants other than Applicant(s):

| <u>Name</u> | <u>Age</u> | <u>Relationship</u> |
|-------------|------------|---------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

No other individuals shall occupy the premises other than those named above.

Pet information:

List name, ages, breed, and other requested information for pet(s):

| <u>Name</u> | <u>Breed</u> | <u>Sex</u> | <u>Weight</u> | <u>Age</u> | <u>Neutered/Spayed</u> | <u>Indoor</u> | <u>Outdoor</u> |
|-------------|--------------|------------|---------------|------------|--|---------------|----------------|
| _____ | _____ | _____ | _____ | _____ | No <input type="checkbox"/> Yes <input type="checkbox"/> | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | No <input type="checkbox"/> Yes <input type="checkbox"/> | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | No <input type="checkbox"/> Yes <input type="checkbox"/> | _____ | _____ |

No other pets shall occupy the premises other than those named above.

General Information:

Will any smokers occupy the property? No Yes

Do you have Tenant's Homeowners Insurance Coverage? No Yes, Insurance Company: _____

Vehicle Information: List automobiles trailers, boats, motorcycles, motor homes, or commercial vehicles be stored at the Property?

| | |
|-----------------------|------------------------|
| Make and Model: _____ | License Plate #: _____ |
| Make and Model: _____ | License Plate #: _____ |
| Make and Model: _____ | License Plate #: _____ |
| Make and Model: _____ | License Plate #: _____ |

RESIDENTIAL LEASE APPLICATION (continued)

Section 5. Acknowledgement, Agreement and Authorization

Applicant(s) represents that all of the above statements are true and complete and authorizes verification of all of the above information by all means available, including employment, personal references, credit records, public records, current and previous property owners and criminal records by the Owner and/or Property Manager. Applicant(s) acknowledges that false information may constitute a breach of the lease entitling the Property Owner, at the Property Owner's option, to repossess the Property. Further, Applicant(s) expressly authorizes Owner and/or Property Manager (including a collection agency) to obtain Applicant(s) consumer credit report, which Owner and/or Property Manager may use if attempting to collect past due rent payments, late fees, or other charges from Applicant(s) both during the term of the lease and thereafter.

Applicant(s) also understands and agrees that this application will be retained by the Owner and/or the Owner's Property Manager whether or not approved. Applicant(s) understands and agrees that, in the future upon request, the Owner and/or the Owner's Property Manager will release information concerning the Owner's experience with Applicant(s) as an Applicant/Tenant(s). Applicant(s) understand and agrees that this application will not be processed without the "Processing Fee" set out in Section 1. Applicant further agrees and understands that this Processing Fee will **NOT BE REFUNDED** regardless of whether or not the Owner accepts this application for residency and the Pre-paid Security Deposit shall **NOT BE REFUNDED** if application is approved and applicant fails to execute a lease and take possession of the subject Property.

Applicant's Signature

Applicant's Signature

Date

Date

The undersigned Broker acknowledges receipt of the non-refundable processing fee.

Broker's Signature

Date

Office Use Only:

| | |
|---|------------------------------------|
| Property Address being applied for: _____ | |
| Security Deposit received on _____ by _____ | Deposit received on _____ by _____ |
| Processing Fee received on _____ by _____ | received on _____ by _____ |