



# National Tenant Network

Comprehensive tenant performance reporting including retail credit, eviction & criminal...

## RENTAL APPLICATION

(PLEASE PRINT with BLACK INK PEN)

### Office Use Only

SUBSCRIBER: EVERGREEN PROPERTIES, SUBSCRIBER# DA431 DATE: \_\_\_/\_\_\_/\_\_\_ TIME: \_\_\_\_\_ AM PM

AGENT/CONTACT: CLIFF, TELEPHONE: 972-620-8442 FAX: 972-852-1619

### REPORT NEEDED:

PACKAGED REPORTS: Combined Report ( X ) Full Service ( )

INDIVIDUAL REPORTS: Retail Credit ( ) Tenant Performance & Eviction ( ) Landlord Verification ( )

Employment Verification ( ) Check/Tech ( )

Criminal Report ( ) Please indicate county(s) Dallas, Tarrant, Johnson

### PROPERTY / LEASE INFORMATION

Address (property you are applying for): \_\_\_\_\_ Estimated Move-In Date: \_\_\_/\_\_\_/\_\_\_

Monthly Rent: \$ \_\_\_\_\_ Security Deposit: \$ \_\_\_\_\_ Pet Deposit: \$ \_\_\_\_\_ Appl. Fee: \$ 30/person 18 & older

If Housing Assisted, check one: ( ) Dallas Housing, ( ) Dallas County Housing, ( ) Lancaster Housing, or Specify: \_\_\_\_\_

### APPLICANTS INFORMATION

**Best Contact Phone Number :** \_\_\_\_\_

**& E-Mail Address:** \_\_\_\_\_

Applicant Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ DOB \_\_\_\_\_

Spouse Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ DOB \_\_\_\_\_

### REASON FOR MOVING AND OCCUPANT INFORMATION

Why are you leaving your present address? \_\_\_\_\_

Have you given your current Landlord a 30 day written notice of your intent to move out ? yes / no

Please List All Persons to be Occupying the Premises (Including Applicant, Spouse, Other Adults and Children):

1. \_\_\_\_\_ Age \_\_\_\_\_ 2. \_\_\_\_\_ Age \_\_\_\_\_

3. \_\_\_\_\_ Age \_\_\_\_\_ 4. \_\_\_\_\_ Age \_\_\_\_\_

5. \_\_\_\_\_ Age \_\_\_\_\_ 6. \_\_\_\_\_ Age \_\_\_\_\_

### PETS (LIST ALL PETS/INSIDE OR OUTSIDE) : NOT ALLOWED

Other (fish, birds, reptiles, etc.) explain manner in which kept: \_\_\_\_\_

Please Return This Application to  
**EVERGREEN PROPERTIES**  
 P. O. BOX 29285 (2557 Fabens Rd.)  
 DALLAS, TX 75229

With money order payable to Evergreen and copy of driver's license.  
 Deposit and First month Rent Payment must be in form of Money Order or Cashiers Check

RENTAL HISTORY

Current Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ How Long? \_\_\_\_\_ Mo. Rent: \$ \_\_\_\_\_

Landlord Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_ How Long? \_\_\_\_\_ Mo. Rent: \$ \_\_\_\_\_

Landlord Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

EMPLOYMENT HISTORY (APPLICANT)

Current Employer \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Position: \_\_\_\_\_ How Long with Current Employer? \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Monthly Salary (Before Taxes): \$ \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Position: \_\_\_\_\_ How Long with Previous Employer?: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Monthly Salary (Before Taxes): \$ \_\_\_\_\_

EMPLOYMENT HISTORY (SPOUSE)

Current Employer \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Position: \_\_\_\_\_ How Long with Current Employer? \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Monthly Salary (Before Taxes): \$ \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Position: \_\_\_\_\_ How Long with Previous Employer?: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Monthly Salary (Before Taxes): \$ \_\_\_\_\_

VEHICLE INFORMATION (LIST ALL MOTOR VEHICLE, INCLUDING BOATS, MOTOCYCLES, ETC)

Make of Auto 1: \_\_\_\_\_ Year: \_\_\_\_\_ License Plates: \_\_\_\_\_ State: \_\_\_\_\_

Make of Auto 2: \_\_\_\_\_ Year: \_\_\_\_\_ License Plates: \_\_\_\_\_ State: \_\_\_\_\_

GENERAL INFORMATION

Have you or your spouse ever

- 1. Been evicted or asked to move out? \_\_\_\_\_
- 2. Declared Bankruptcy? \_\_\_\_\_
- 3. Been sued for nonpayment of rent? \_\_\_\_\_
- 4. Been sued for damage to property? \_\_\_\_\_
- 5. Broken a rental agreement or lease? \_\_\_\_\_
- 6. Been convicted of misdemeanor/felony? \_\_\_\_\_

If Yes to any, explain: \_\_\_\_\_

Nearest Relative: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

CERTIFICATION / SIGNATURE ( ALL APPLICANTS MUST SIGN)

I/We certify that the above information is correct and complete and hereby authorize you to make any inquires you feel necessary to evaluate this rental application. I understand that false information herein may constitute grounds for rejection of this application. If I rent the unit, I understand the information contained on this form and rental agreement may be maintained in a tenant database for up to six (6) years after I vacate the premises.

**I/We understand that if we fail to sign the lease and occupy the property within fourteen (14) days from date Security Deposit is, the entire security deposit will be forfeited as liquidated damages for the landlord's forbearance in removing the property from the market and not leasing it to any other applicant. Should this event occur, the landlord and Evergreen Properties (Agent) shall have no further obligations to Applicant/Lessee.**

\_\_\_\_\_  
Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Signature Date: \_\_\_\_\_