

RENTAL APPLICATION

Landlord:
Harvest for Lost Souls Outreach
3395 Highland Ave
Beaumont, Texas 77705

This Application is made to rent:
Harvest Ministry House 140 E. Alma
Beaumont, Texas 77705

Description: 2 Bedroom, 1 bath, den, living room, kitchen, laundry room

Rental Terms: 6 months.

Desired date of occupancy: _____

Desired length of occupancy: _____

Reason for moving: _____

The rent shall be \$750.00 per month, payable in advance plus last months rent -\$750.00. The following deposit is required: Security deposit of \$350.00 The deposit will be returned to the Applicant if the Premises are not rented to the Applicant. The total amount of \$1850.00 shall be due upon occupancy of the Premises. **(You only pay Electric bill)** The Applicant understands that the Landlord may perform a credit check to verify the Applicant's credit references and credit history in connection with the processing of this Rental Application.

APPLICANT INFORMATION

Name: _____

No. of occupants: Adults: _____ Children: _____ Ages of children: _____

PRESENT ADDRESS: _____

How long at present address: _____

Home Phone No.: (____) _____

Landlord's Name: _____

Phone No.: (____) _____ Current rent payment: _____

PRIOR ADDRESS: _____

How long at prior address: _____

Landlord's Name: _____

Phone No.: (____) _____

Rent payment: _____

Reason for moving: _____

Social Security No.: _____ - _____ - _____ Driver's License No. : _____

Vehicle Model: _____ Year: _____ License No.: _____

Vehicle Model: _____ Year: _____ License No.: _____

SOURCES OF INCOME:

CURRENT EMPLOYER: _____

Annual Income: _____

Wages \$ _____ Salary \$ _____ Commission \$ _____ Tips \$ _____

Gov't assistance \$ _____ Child support/Alimony \$ _____ Other \$ _____

Position: _____ How long: _____

Supervisor: _____ Business Phone: (____) _____

PRIOR EMPLOYER: Employer: _____

Annual Income: _____

NEAREST RELATIVE NOT LIVING WITH YOU:

Name: _____

Address: _____

Home Phone No.: (____) _____ Relationship: _____

PERSONAL REFERENCES:

Name: _____

Address: _____

Phone No.: (____) _____ Relationship: _____

Name: _____

Address: _____

Phone No.: (____) _____ Relationship: _____

Do you own real estate? Yes ____ No ____ If yes, please explain where:

Have you ever been evicted from any rental Premises? Yes ____ No ____ If yes, please explain:

Have you ever willfully and intentionally refused to pay rent when due? Yes ____ No ____

If yes, please explain:

Position: _____ How long: _____ Supervisor: _____

Business Phone: (____) _____

Are there any circumstances which may interrupt your income or ability to pay rent? Yes ____ No ____

If yes, please explain: _____

Have you ever been convicted of a felony? Yes ____ No ____ If yes, please explain:

I represent that the information provided in this Application is true and correct to the best of my knowledge. Harvest for Lost Souls Outreach is authorized to verify the references and employment information given in this Application and to request a credit check. I acknowledge receipt of a copy of this application.

IT IS AGAINST THE LAW TO DISCRIMINATE AGAINST PROSPECTIVE TENANTS ON THE BASIS OF RACE, RELIGION, NATIONAL ORIGIN, AGE, DISABILITY OR FAMILY STATUS. LOCAL OR STATE LAWS MAY INCLUDE ADDITIONAL CLASSES WHICH ARE PROTECTED FROM DISCRIMINATION IN HOUSING. The information provided by the prospective tenant(s) may be used by Harvest for Lost Souls Outreach to determine whether to accept this Application. Upon written request within 60 days, Harvest for Lost Souls Outreach will disclose to the Applicant in writing the nature and scope of any investigation Harvest for Lost Souls Outreach has requested, and will, if the Application is refused, state in writing the reason for said refusal.

Accepted: _____ Refused: _____ By: _____

Applicant's Signature

Date

Harvest for Lost Souls Outreach 3395 Highland Ave Beaumont, Texas 77705 _____

Dear _____

Employer: We are in the process of confirming information provided by a prospective tenant who has provided your name as employer in connection with a rental application. Please verify the information provided by the tenant by telephone or return the form to me at the above address. My phone number is 409-212-1399. The best time to reach me is 9:00 am - 2:30 pm M, W-F. Thank you for your cooperation. _____ Harvest for Lost Souls Outreach

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TENANT SUPPLIED INFORMATION

Prospective Tenant's Name: _____ Position: _____
Wage/Salary: _____

Per: _____ Length of time with above Employer: _____ I have completed the above information in connection with a rental application. The addressee of this letter is authorized to verify this information and supply the above named landlord with the information requested in the following items. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your officers. Prospective Tenant's Signature:

VERIFICATION TO BE COMPLETED BY EMPLOYER Is the employment information correct: Yes ___ No ___ Is this employment: Part-time ___ Full-time ___ Temporary ___ Permanent ___ Information provided by: _____ Title: _____

Date: _____

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