| Received on | (date) at | (time) |
|-------------|-----------|--------|
| Received on | (date) at | (ume) |



RESIDENTIAL LEASE APPLICATION

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Each occupant and co-applicant 18 years or older must submit a separate application.

| Property Address: 2126 Winged Foot Dr Misso | ouri City 77 | 459 | | | |
|---|----------------------------|---------------------------|---------------------------|----------------|-------|
| Anticipated: Move-in Date: 06/27/2025 Monthly | | 1945 | Security Deposit: \$ | 1945 | |
| Initial Lease Term Requested: 12 (mor | nths) | | | | |
| A Applicant Identification | | | | | |
| A. Applicant Identification: | | | | | |
| Applicant's name (as listed on proof of identification) Eth | an Thomp | son | | | |
| Applicant's former last name (if applicable) | | | | | |
| E-mail Ethoman2115@gmail.com | | Мо | bile Ph. 346970991 | 8 | |
| Work Ph.713-547-7170 | Home | | | | |
| Do you consent to receiving text messages? xyes | no | Soc. Sec. N | o. <u>645185953</u> | | |
| Driver License/ID No. 27878605 | in | (state) | Date of Birth07/ | 10/1990 | |
| Height 5'11 Weight 220 | Eye Cold | or Brown | Hair Color _ | Black | |
| | | | | | |
| Are there co-applicants? √ yes no Note: If ye | os oach co-a | nnlicant must | submit a separate applica | ation | |
| Co-applicant's name Micholette Cooke | es, each co-a _l | opiicani musi | relationship Wife | ition. | |
| | | | relationship | | |
| Co-applicant's name | | | relationship | | |
| | | | Tolationomp | | |
| B. Property Condition: | | | | | |
| Applicant has has not viewed the Property in- | person prio | r to submittir | ng this application. | | |
| Applicant is strongly encouraged to view the | Property in | n-person p | rior to submitting ar | ıy application | 1. |
| Landlord makes no express or implied warrantie | es as to the | Property's | condition Applicant | requests I and | dlord |
| consider the following repairs or treatment | | | | | |
| consider the following repairs of treatment | ts silouid | Дррпсанс | and Landiold Citi | si iiito a ie | asc. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| C. Representation and Marketing: | | | | | |
| le Applicant represented by a DEALTOR® or oth | or ononto [| | | | |
| Is Applicant represented by a REALTOR® or oth | er agent? D | yes no | | | |
| If yes, Name: Subrina Morton | | | | | |
| Company: Texas Ally Real Estate Group | | Dhan | a Numahani F40 40 | 0.5500 | |
| E-mail: AgentSubrina@gmail.com | | Prion | e Number: <u>512-40</u> | J-55ZZ | |
| Applicant was made aware of Property via: | | | | | |
| Sign X Internet Other | | | | | |
| | | | | _ | |

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D. Applicant Information:

| Housing: | | | | | | | | |
|-----------------|---|--------|---|---|---|---|---|--|
| HUUSIIIU. | ш | \sim | | • | | n | ~ | |
| | | v | u | J | ı | | ч | |

| Applicant's Current Address: 2115 Fall Meadow dr | Apt | No. |
|---|-----------------------|----------------------------|
| | | (city, state, zip) |
| Landlord or Property Manager's Name: Cedrick Willson Email: Phone: Day: 254-624-3886 Nt: Mb: Move In Date: 07-01-2023 Move Out Date: 7/1/2025 Peason for move: Landlord is calling home | | |
| Phone: Day: 254-624-3886 Nt: Mb: | Fax: | |
| Move In Date: <u>07-01-2023</u> Move Out Date: <u>//1/2025</u> | Rent \$ <u>18</u> | 350 |
| Reason for move: <u>Landlord is selling home</u> | | |
| Applicant's Previous Address: 919 s ripple creek dr | | |
| Landlord or Property Manager's Name: Lawrence Carter Email: | | |
| Email: Phone: Day: 951-259-3094 Move In Date May 2021 Reason for move: To relocated closer to family | Fax: | |
| Move In Date May 2021 Move Out Date: June 2023 | Rent \$ 235 | 50 |
| Reason for move: To relocated closer to family | | |
| Employment and Other Income: | | |
| Applicant's Current Employer: Dairy Oak Farms Of America | | |
| Address: 3430 Leeland St Houston TX 77003 Employment Verification Contact: Stephanie Pena | (| street, city, state, zip) |
| Employment Verification Contact: Stephanie Pena | Phone | : _7135477170 |
| Fax: E-mail: Laura.pena1@dfamilk.com Start Date: July 1 2024 Gross Monthly Income: \$ 6000 | Danitian. | |
| Note: If Applicant is self-employed, Landlord may require one or more p | rosition. <u>Clas</u> | ss A Driver |
| by a CPA, attorney, or other tax professional. | orevious years | lax return allested |
| | | |
| Applicant's Previous Employer: _Emtransport | | |
| Address: 900 lockwood dr Houston Tx 77020 Employment Verification Contact: Helen Gutierrez | (| street, city, state, zip) |
| Employment Verification Contact: Helen Gutierrez | Phone | : 951-324-3388 |
| Fax: E-mail: HGService@emtransport.info Employed from 2019 to 2024 Gross Monthly Income: \$ 800 | | |
| Employed from 2019 to 2024 Gross Monthly Income: \$ 800 | 00 Positi | on: <u>Owner Opera</u> tor |
| Note: Applicant is responsible for including the appropriate contact infor purposes. | mation for emp | loyment verification |
| Describe other income Applicant wants considered:Every other week I pe | | |
| Enterprises. I will incl | lude if needed | . Please let me kno |
| this is needed for inc | ome requirem | ents. |
| | • | |
| Emergency Contact: (Do <u>not</u> insert the name of an occupant or co-app | licant.) | |
| Name and Relationship: Samuel Thompson | | |
| Address: 3802 Panorama Dr | | |
| City: Missouri City State: TX | Zip Code: | 77459 |

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E-mail:

| i toolao | mar Loado / tpp | onoution concoming | | | | |
|------------|-----------------|--------------------|---|------------------------------|---------------------------|-----------------------|
| E. O | ccupant Info | ormation: | | | | |
| Name | all other pe | rsons that are no | ot co-applicants wh | no will occupy the I | Property: | |
| Name | ·• | | | Relationshi | n· | DOB: |
| Name | · | | | | p: | _ DOB: |
| Name | : | | | Relationshi | p: | DOB: |
| Name | : | | | | p: | DOB: |
| F. Ve | ehicle Inforr | nation: | | | | |
| List al | I vehicles to | be parked on th | e Property (cars, tı | rucks, boats, traile | rs, motorcycles, other | types of vehicles) |
| | <u>Type</u> | <u>Year</u> | <u>Make</u> | <u>Model</u> | License Plate No./Stat | te <u>Mo. Payment</u> |
| | Truck | 2011 | Toyota | Tundra | | 0 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Note: | State local | and/or HOA ordi | nances mav restric | t vour ability to par | k certain vehicles on t | the Property |
| | | una, or mon oran | nances may resure | t your ability to par | K certain vemoies on | ine i roperty. |
| G. An | imals: | | | | | |
| Will a | nv animals (| dogs. cats. birds | s, reptiles, fish, othe | er types of animals |) be kept on the Prop | ertv? |
| | s | | , | , p | , sopp | , . |
| ı . | list all autius | ala 4a laa kam4 am | the Due is a set or | | | |
| ır yes, | iist ali animi | als to be kept or | i the Property: | | R | Rabies Assistance |
| Type & | Breed | Name Colo | r Weight Age in Yrs | s. <u>Gender</u> <u>Neut</u> | ered? Bite History? Shot | ts Current? Animal? |
| | | | | Y | | Y |
| | | | | | | Y N Y N |
| | | | | Y | | Y N Y N |
| | | | | | | |
| | | | e are assistance a st for the assistance | | ovide appropriate do | cumentation with a |
| Н. Ас | dditional Inf | ormation: | | | | |
| Voc | No | | | | | |
| <u>Yes</u> | No X | Will any wat | terbeds or water-fil | lled furniture he on | the Property? | |
| | V | | ne who will occupy | | | |
| x | | • | nt maintain renter's | | o or vapo: | |
| X | v | | or Applicant's spo | | ated in military? | |
| H | X | | | | s limiting the military p | erson's stay to |
| Ш | 1 | one year or | | in villig under ordere | minung the minung p | orderro day to |
| Has A | pplicant eve | • | | | | |
| <u>Yes</u> | <u>No</u> | | | | | |
| Ц | x | been ev | | | | |
| Ц | L× | | ked to move out by | | | |
| Н | × | | d a lease or rental | agreement? | | |
| Н | X | | bankruptcy? | | | |
| Н | X | | perty in a foreclosu | | pootion voor and time | of conviction holes |
| \Box | $ \mathbf{X} $ | been col | ivicted of a crime? I | ıı yes, provide the lo | cation, year, and type o | of conviction below. |

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| Residential Lease Appli | cation concerning2126 Winged Foot Dr Missouri City 77459 |
|--|--|
| <u>Yes</u> <u>No</u> | |
| | Is any occupant a registered sex offender? If yes, provide the location, year, and type |
| | conviction below. |
| X | Has applicant had <u>any</u> credit problems, slow-pays or delinquencies? If yes, provide mo information below. |
| x | Is there additional information Applicant wants considered? |
| Additional commen | s: |
| | |
| | |
| I. Authorization: | |
| Applicant authorize | s Landlord and Landlord's authorized agent, at any time before, during, or after ar |
| (1) obtain a cop | y of Applicant's credit report; |
| (3) verify any re | ninal background check related to Applicant and any occupant; and ental or employment history or verify any other information related to this application wiw wledgeable of such information. |
| separate written ag | I's Right to Continue to Show the Property: Unless Landlord and Applicant enter into reement otherwise, the Property remains on the market until a lease is signed by all participation on the show the Property to other prospective tenants and accept another offer. |
| Privacy Policy: Lar | dlord's agent or property manager maintains a privacy policy that is available upon request. |
| Face: Annlicant su | omits a non-refundable fee of \$ to |
| | or processing and reviewing this application. |
| | \square will not submit an application deposit of \$ $\underline{1945}$ to be applied to the securition of a lease or returned to Applicant if a lease is not executed. |
| Acknowledgemen | & Representation: |
| (1) <u>Signing this</u> <u>selection cri</u> <u>as criminal l</u> (2) <u>Applicant ur</u> | application indicates that Applicant has had the opportunity to review Landlord's tena eria, which is available upon request. The tenant selection criteria may include factors successful history, current income, and rental history. Idenstands that providing inaccurate or incomplete information is grounds for rejection of the land forfeiture of any application fee and may be grounds to declare Applicant in breach |
| | e Applicant may sign. |
| | oresents that the statements in this application are true and complete. responsible for any costs associated with obtaining information. |
| (+) <u>replicant is</u> | |
| Annlicant's Signatu | e Ethan Thompson Date |
| ripphodrit's Oighata | - Etipii Monipson |
| For Landlord's Use: | |
| On | (name/initials) notifi |
| ☐ Applicant ☐ ☐ approved ☐ not a | by \square phone \square mail \square e-mail \square fax \square in person that Applicant w proved. Reason for disapproval: |
| | h |

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AUTHORIZATION TO RELEASE INFORMATION RELATED TO A RESIDENTIAL LEASE APPLICANT

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| I,Ethan Thompson to lease a property located at2126 Winged Foot Dr Missou | (address, city, state, zip). |
|--|---|
| The landlord, broker, or landlord's representative is: | |
| | (name) (address) |
| | (city, state, zip) |
| (phone) | (fax) (e-mail) |
| I give my permission: | |
| to my current and former employers to release any information history to the above-named person; | mation about my employment history and income |
| (2) to my current and former landlords to release any informationperson; | ation about my rental history to the above-named |
| (3) to my current and former mortgage lenders on proper information about my mortgage payment history to the a | |
| (4) to my bank, savings and loan, or credit union to provide the above-named person; and | e a verification of funds that I have on deposit to |
| (5) to the above-named person to obtain a copy of my con reporting agency and to obtain background information | |
| 5/31/202 | 25 |
| Applicant's Signature Ethan Thompson | Date |

of the information described in this authorization. The broker maintains a privacy policy which is available upon request.

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