



RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married).
Please fill out this form **COMPLETELY** and sign where indicated.

PERSONAL INFORMATION

FIRST NAME	Kayla	MIDDLE	BreeAnn	LAST	Simmons	S.S.#	638-26-8293		
DATE OF BIRTH	11/20/1991	MARITAL STATUS	<input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED Since <input type="checkbox"/> DIVORCED Since	DRIVERS LICENSE #	46716335	STATE	TX		
PHONE	903-486-8628	<input checked="" type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE	903-583-8508	EXT.	<input checked="" type="checkbox"/> HOME <input type="checkbox"/> WORK	EMAIL	Snu-Snu1@yahoo.com	
PRESENT HOME ADDRESS	601 oldham st	CITY/STATE/ZIP	Bonham TX 75418	LENGTH OF TIME	3yrs	PRESENT LANDLORD	Jan Dogay	LANDLORD PHONE	903-583-8508
REASON FOR LEAVING	too crowded.	AMOUNT OF RENT	300.00	Is your present rent up to date?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	PREVIOUS HOME ADDRESS		CITY/STATE/ZIP	
LENGTH OF TIME		PREVIOUS LANDLORD		LANDLORD PHONE		REASON FOR LEAVING		AMOUNT OF RENT	
REASON FOR LEAVING		AMOUNT OF RENT		Was your rent up to date?	<input type="checkbox"/> YES <input type="checkbox"/> NO	NEXT PREVIOUS HOME ADDRESS		CITY/STATE/ZIP	
LENGTH OF TIME		NEXT PREVIOUS LANDLORD		LANDLORD PHONE		REASON FOR LEAVING		AMOUNT OF RENT	
REASON FOR LEAVING		AMOUNT OF RENT		Was your rent up to date?	<input type="checkbox"/> YES <input type="checkbox"/> NO				

PROPOSED OCCUPANT(S)

NAME	Kayla B. Simmons	RELATIONSHIP	me	OCCUPATION	Production worker	AGE	25
NAME	Steven weiner	RELATIONSHIP	Boyfriend	OCCUPATION	Production Worker	AGE	25
NAME	Hailey Simmons	RELATIONSHIP	Daughter	OCCUPATION	school	AGE	5
NAME		RELATIONSHIP		OCCUPATION		AGE	
NAME		RELATIONSHIP		OCCUPATION		AGE	

PROPOSED PET(S)

NAME	NA	TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE	
NAME		TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE	
NAME		TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE	

VEHICLE(S) INFORMATION

YEAR	MAKE	MODEL	COLOR	PLATE #	STATE
	chevy	impala	red		TX
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE

EMPLOYMENT

CURRENT EMPLOYER	Clayton Homes	OCCUPATION	Production	HOURS/WEEK	40+		
SUPERVISOR	Jimmy H.	PHONE	903-583-1949	EXT.		YEARS EMPLOYED	3
ADDRESS		CITY/STATE/ZIP	Bonham TX 75418				
CURRENT EMPLOYER	Clayton Homes	OCCUPATION	Production	HOURS/WEEK	40+		
SUPERVISOR	Donald Feagun	PHONE	903-583-1949	EXT.		YEARS EMPLOYED	3 1/2
ADDRESS		CITY/STATE/ZIP					

INCOME

CURRENT INCOME	\$480	WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	Clayton	PROOF OF INCOME	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT INCOME	\$508	WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	Clayton	PROOF OF INCOME	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT INCOME		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE		PROOF OF INCOME	<input type="checkbox"/> YES <input type="checkbox"/> NO



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CREDIT CARD / FINANCIAL INFORMATION

CAR LOAN LIEN HOLDER	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CHILD SUPPORT/ OTHER CREDIT OWED	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
BANK ACCOUNT NAME OF BANK	BALANCE	MONTHLY PAYMENT	ACCOUNT NUMBER

EMERGENCY / PERSONAL REFERENCE INFORMATION

EMERGENCY CONTACT <i>Jan Dugay</i>	PHONE <i>903-583-6508</i>	<input type="checkbox"/> CELL <input checked="" type="checkbox"/> HOME	PHONE — —	<input type="checkbox"/> HOME <input type="checkbox"/> WORK
RELATION <i>Boyfriends Mother</i>	ADDRESS <i>1601 Oldham St</i>		CITY/STATE/ZIP <i>Bonham TX 75418</i>	
EMERGENCY CONTACT	PHONE — —	<input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE — —	<input type="checkbox"/> HOME <input type="checkbox"/> WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
PERSONAL REFERENCE	PHONE — —	<input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE — —	<input type="checkbox"/> HOME <input type="checkbox"/> WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
PERSONAL REFERENCE	PHONE — —	<input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE — —	<input type="checkbox"/> HOME <input type="checkbox"/> WORK
RELATION	ADDRESS		CITY/STATE/ZIP	

APPLICANT QUESTIONNAIRE / AUTHORIZATION

Has applicant ever been sued for bills? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Has applicant ever been locked out of their apartment by the sheriff? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Has applicant ever been bankrupt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Has applicant ever been brought to court by another landlord? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Has applicant ever been guilty of a felony? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Has applicant ever moved owing rent or damaged an apartment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Has applicant ever broken a Lease? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Is the total move-in amount available now (rent and deposit)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant.
All information is true, accurate and complete to the best of applicant's knowledge. Landlord reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME.

x *Kayla B Simmons*
APPLICANT SIGNATURE

2/28/17
DATE

If you have any questions about the interpretation or legality of this form, please consult an attorney or other qualified person.

NOTES:

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2014
2016