

RENTAL APPLICATION

(Please Print)

Applicant Name: _____ Date of Birth _____ Age _____ Years of School _____

FIRST MIDDLE OR MAIDEN LAST

Co-Applicant Name: _____ Date of Birth _____ Age _____ Years of School _____

FIRST MIDDLE OR MAIDEN LAST

Marital Status:(circle one) Married Single Divorced If Divorced-how long _____ Number of Children: _____ Ages _____

Names of Children _____ # of Vehicles _____ Describe _____

Applicant SS# _____ Drivers License # _____ Spouse SS# _____ Drivers License # _____

(Leave SS# & DL# blank and we will call you and get it due to email not being secure on the web) Email address _____

Applicant Phone # _____ Spouse or Other Phone # _____

Present Address: _____ City _____ State _____ Zip Code _____

Circle One: Own Rent How Long _____ Landlord or Lender Name: _____ City _____ PH # _____

Previous Address: _____ City _____ State _____ Zip Code _____ Circle One: Own Rent How Long _____

Landlord or Lender Name: _____ City _____ STATE _____ PH # _____

Applicant Monthly Gross Pay _____ Spouse Monthly Gross Pay _____ Other Income(describe) _____ \$-month _____

Monthly House or Lease Payment Amount: \$ _____ Monthly Car Payment Amount(s): \$ _____ Monthly Visa Payment: \$ _____

Other Payments (List type and amounts) _____

Applicant Employer: _____ City _____ State _____ Zip Code _____ Phone # _____

Applicant Position at Work _____ Number of Years With Present Employer _____

Previous Employer: _____ Number of Years With Employer _____

Spouse Employer: _____ City _____ State _____ Zip Code _____ Phone # _____

Spouse Position at Work _____ Number of Years With Present Employer _____

Previous Employer: _____ Number of Years With Employer _____

Name of Bank: _____ City _____ State _____ Contact Officer at Bank _____

Phone Number _____ Type of Accounts (circle all that apply) Checking Savings CD Loans

Name of Bank: _____ City _____ State _____ Contact Officer at Bank _____

Phone Number _____ Type of Accounts (circle all that apply) Checking Savings CD Loans

List Any Other Financial References:

Name: _____ City _____ Contact Person _____ Phone # _____

Name: _____ City _____ Contact Person _____ Phone # _____

Any pets? Indoor _____ Outdoor _____ If so, age, breed & weight _____

I, _____ & _____ do hereby give my consent for Philip Crowell of 8979 Hwy 287 South, Corsicana, Texas 75109 to expedite any past history check of credit, civil, criminal, and any other information he deems necessary to validate me as responsible person. Please include last 3 pay stubs for each applicant.

Signature _____ Date _____

Signature _____ Date _____

Send to address above, FAX to 903-200-0307, or Email to info@crowellproperties.com with pay history from current landlord.