

OKLAHOMA REAL ESTATE COMMISSION

OFFICE USE ONLY

Applicant Name (Last, First)

Best phone number

Best email

RESIDENTIAL LEASE APPLICATION

Section 1. Rental Property/Lease Information

Property Address: _____

Lease Start Date: _____ Lease End Date: _____

Rent Amount \$ _____ payable in certified funds before or at time of possession.

Security Deposit \$ _____ payable in certified funds upon approval of application or to be prepaid in advance by certified funds, shall not be refunded if application is approved and applicant fails to execute a lease and take possession of the subject property. Prepaid security deposit shall be refunded if application is not approved.

_____ Deposit \$ _____ payable in certified funds upon approval of application.

Processing Fee. The Application and Credit Check Processing Fee is \$ 25.00 _____ for each credit report, payable in cash, certified funds at time of application. Employment, personal references, credit records, public records, current and previous property landlords' references and criminal records may be checked as part of the processing of the application. This Processing Fee is NOT REFUNDABLE.

Upon approval of application, applicant has the right to receive a copy of the lease for review for 3 _____ days (3 days if left blank) before they are required to sign.

NOTICE: The above Property is offered for lease without regard to sex, race, religion, color, handicap, familial status, age or national origin.

Section 2. Applicant Information (A copy of photo identification for all applicants must be submitted with this application)

Applicant

Name: _____ (First, Middle, Last)

Soc. Sec. #: _____ - _____ - _____ Date of Birth: _____

Best Phone #: _____ Work#: _____ Cell #: _____

Email: _____ Drivers Lic. #: _____ Photo ID: _____ Yes _____ No

In Case of Emergency or Death (pursuant to Title 41 O.S. §130.1A) notification is to be made to:

Name: _____ Phone: _____ Alt. Phone: _____

Must not be a co-applicant or someone who will be residing in the residence with you.

Address: _____ Relationship: _____

Present Address Information

Is present Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

Previous Address Information

Was Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

RESIDENTIAL LEASE APPLICATION (continued)

Employment History

Current Employer: _____	Previous Employer: _____
Position: _____	Position: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
How Long: _____ Gross Monthly Income: _____	How Long: _____ Gross Monthly Income: _____
Supervisor: _____ Phone #: _____	Supervisor: _____ Phone #: _____
Other Income: _____ Source: _____	
Do you have a checking/savings account? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes what bank? _____	
Have you ever:	
Filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes date of discharge? _____	
Been evicted? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	
Broken a lease? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	
Been convicted of a felony/misdemeanor? <input type="checkbox"/> No <input type="checkbox"/> Yes, for _____	
Been sued for nonpayment of rent? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	
Been sued for damage to rental property? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	

Section 3. Co-Applicant Information (A copy of photo identification for all applicants must be submitted with this application)

Applicant

Name: _____
(First, Middle, Last)

Soc. Sec. #: _____ - _____ - _____ Date of Birth: _____

Best Phone #: _____ Work#: _____ Cell #: _____

Email: _____ Drivers Lic. #: _____ Photo ID: Yes No

In Case of Emergency or Death (pursuant to Title 41 O.S. §130.1A) notification is to be made to:

Name: _____ Phone: _____ Alt. Phone: _____
 Must not be a co-applicant or someone who will be residing in the residence with you.

Address: _____ Relationship: _____

Present Address Information

Is present Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

Previous Address Information

Was Landlord related to you? _____

Address: _____

City: _____ State: _____ Zip: _____

How long? Years _____ Months _____ Rent/Mortgage Pmt. _____

Present Landlord/Mortgage Co: _____

Phone: _____

Reason for Leaving: _____

RESIDENTIAL LEASE APPLICATION (continued)

Employment History

Current Employer: _____	Previous Employer: _____
Position: _____	Position: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
How Long: _____ Gross Monthly Income: _____	How Long: _____ Gross Monthly Income: _____
Supervisor: _____ Phone #: _____	Supervisor: _____ Phone #: _____
Other Income: _____ Source: _____	
Do you have a checking/savings account? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes what bank? _____	
Have you ever:	
Filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes, if yes date of discharge? _____	
Been evicted? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	
Broken a lease? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	
Been convicted of a felony/misdemeanor? <input type="checkbox"/> No <input type="checkbox"/> Yes, for _____	
Been sued for nonpayment of rent? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	
Been sued for damage to rental property? <input type="checkbox"/> No <input type="checkbox"/> Yes, please explain _____	

Section 4. Other Information

Occupant Information

List name, ages, and relationship of occupants other than Applicant(s):

<u>Name</u>	<u>Age</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

No other individuals shall occupy the premises other than those named above.

Pet information:

List name, ages, breed, and other requested information for pet(s):

<u>Name</u>	<u>Breed</u>	<u>Sex</u>	<u>Weight</u>	<u>Age</u>	<u>Neutered/Spayed</u>	<u>Indoor</u>	<u>Outdoor</u>
No pets allowed	_____	_____	_____	_____	No <input type="checkbox"/> Yes <input type="checkbox"/>	_____	_____
_____	_____	_____	_____	_____	No <input type="checkbox"/> Yes <input type="checkbox"/>	_____	_____
_____	_____	_____	_____	_____	No <input type="checkbox"/> Yes <input type="checkbox"/>	_____	_____

No other pets shall occupy the premises other than those named above.

General Information:

Will any smokers occupy the property? No Yes

Do you have Tenant's Homeowners Insurance Coverage? No Yes, Insurance Company: _____

Vehicle Information: List automobiles trailers, boats, motorcycles, motor homes, or commercial vehicles be stored at the Property?

Make and Model: _____	License Plate #: _____
Make and Model: _____	License Plate #: _____
Make and Model: _____	License Plate #: _____
Make and Model: _____	License Plate #: _____

