



APD Associates
6601 Montana Avenue, Suite J
El Paso, TX 79925
Business: (915) 779-5611
Toll Free: (800) 222-5611
Fax: (915) 779-5059
E-Mail: cent21apd@aol.com

Tenant's Selection Criteria

Upon receipt of an application for rent we will proceed to obtain information for a prospective tenant. Tenant must have viewed the home, accompanied by their real estate agent. No application will be approved until the home has been seen by the tenant or a representative of the tenant, if tenant is out of town.

Applications are processed Monday thru Friday 9:00 am to 5:00 pm, we will do our best to resolve an application within 48 to 72 business hours. We may have delays in processing if rental history is not obtained quickly or owner is not available for presentation. Applications received over the weekend will be processed the next business day.

We will run a credit report through Experian/TRW reporting agency.

We do not have a minimum credit score, all applications will be considered and presented to the owner of the home. We will analyze the type accounts that are open and current or delinquent balances, in particular time of delinquency and nature of account.

We will contact your current landlord to verify rental history, we may go back up to two years on rental history.

Applicant must be currently employed, with a minimum of one year at current employment. Income must be equivalent to three times the rent amount. Income to be considered can be from employment, social security, disability, annuities, child support, and public assistance.

Century 21 APD Associates manages homes for individual owners.

Upon verification of all information stated above application will be submitted to owner of the home, they will make the ultimate decision on approval or denial of application. Once owner has been presented all information they may decide to deny the application or approve with higher deposit or rent.

Lease terms are for one year minimum, any application submitted must clearly state desired term of contract which will also be presented to the owner for approval.

Homes are on the market on as-is condition unless stated otherwise. **Any request for repairs** must be presented for negotiation up front with lease application.

Deposit is to be paid immediately upon approval of application to secure home. Leases are to begin no later than ten days from approval date. First month's rent and deposit are to be paid in certified funds only (money order or cashier's check). Pet deposit will apply, varies by property, amount stated is per pet, multiple pets will require multiple deposit.

Processing fee is \$25.00 which is non-refundable, not applied towards security deposit or rent whether the application is approved or denied.



TEXAS ASSOCIATION OF REALTORS®

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS® IS NOT AUTHORIZED.

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

Property Address: _____
Anticipated: Move-in Date: _____ Monthly Rent: \$ _____ Security Deposit: \$ _____
Initial Lease Term Requested: _____ (months)

Property Condition:
Landlord makes no express or implied warranties as to the Property's condition. Applicant requests Landlord consider the following repairs or treatments should Applicant and Landlord enter into a lease: _____

Applicant was referred to Landlord by:
 Real estate agent _____ (name) _____ (phone) _____ (e-mail)
 Newspaper Sign Internet Other _____

Applicant's name (first, middle, last) _____
Is there a co-applicant? yes no **If yes, co-applicant must submit a separate application.**
Applicant's former last name (maiden or married) _____

E-mail _____ Home Phone _____
Work Phone _____ Mobile/Pager _____
Soc. Sec. No. _____ Driver License No. _____ in _____ (state)
Date of Birth _____ Height _____ Weight _____ Eye Color _____
Hair Color _____ Marital Status _____ Citizenship _____ (country)

Emergency Contact: (Do not insert the name of an occupant or co-applicant.)
Name: _____
Address: _____
Phone: _____ E-mail: _____

Name all other persons who will occupy the Property:
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____

Applicant's Current Address: _____ Apt. No. _____

(city, state, zip)
Landlord or Property Manager's Name: _____ Email: _____
Phone: Day: _____ Nt: _____ Mb: _____ Fax: _____
Date Moved-In: _____ Move-Out Date _____ Rent \$ _____
Reason for move: _____

Applicant's Previous Address: _____ Apt. No. _____

(city, state, zip)
Landlord or Property Manager's Name: _____ Email: _____
Email: _____
Phone: Day: _____ Nt: _____ Mb: _____ Fax: _____

Residential Lease Application concerning _____

Date Moved-In _____ Move-Out Date _____ Rent \$ _____
Reason for move: _____

Applicant's Current Employer: _____
Address: _____ (street, city, state, zip)
Supervisor's Name: _____ Phone: _____ Fax: _____
E-mail: _____
Start Date: _____ Gross Monthly Income: \$ _____ Position: _____
Note: If Applicant is self-employed, Landlord may require one or more previous year's tax return attested by a CPA, attorney, or other tax professional.

Applicant's Previous Employer: _____
Address: _____ (street, city, state, zip)
Supervisor's Name: _____ Phone: _____ Fax: _____
E-mail: _____
Employed from _____ to _____ Gross Monthly Income: \$ _____ Position: _____

Describe other income Applicant wants considered: _____

List all vehicles to be parked on the Property:

| Type | Year | Make | Model | License Plate No./State | Mo.Pymnt. |
|------|------|------|-------|-------------------------|-----------|
| | | | | | |
| | | | | | |

Will any pets (dogs, cats, birds, reptiles, fish, and other pets) be kept on the Property? yes no
If yes, list all pets to be kept on the Property:

| Type & Breed | Name | Color | Weight | Age in Yrs. | Gender | Neutered? | Declawed? | Rabies Shots Current? | Bite History? |
|--------------|------|-------|--------|-------------|--------|---|---|---|---|
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |
| | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N |

| Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Will any waterbeds or water-filled furniture be on the Property? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does anyone who will occupy the Property smoke? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will Applicant maintain renter's insurance? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is Applicant or Applicant's spouse, even if separated, in military? If yes, is the military person serving under orders limiting the military person's stay to one year or less? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has Applicant ever: been evicted? been asked to move out by a landlord? breached a lease or rental agreement? filed for bankruptcy? lost property in a foreclosure? had <u>any</u> credit problems, including any outstanding debt (e.g., student loans or medical bills), slow-pays or delinquencies? been convicted of a crime? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is any occupant a registered sex offender? If yes, provide the location, year, and type of conviction below. |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there additional information Applicant wants considered? |

Residential Lease Application concerning _____

Additional comments: _____

Applicant authorizes Landlord and Landlord's agent, at any time before, during, or after any tenancy, to:

- (1) obtain a copy of Applicant's credit report;
- (2) obtain a criminal background check related to Applicant and any occupant; and
- (3) verify any rental or employment history or verify any other information related to this application with persons knowledgeable of such information.

Unless Landlord and Applicant enter into a separate written agreement otherwise, the Property remains on the market until a lease is signed by all parties and Landlord may continue to show the Property to other prospective tenants and accept another offer.

Landlord's agent or property manager maintains a privacy policy that is available upon request.

Applicant submits a non-refundable fee of \$ _____ to _____ (entity or individual) for processing and reviewing this application. Applicant submits will not submit an application deposit of \$ _____ to be applied to the security deposit upon execution of a lease or returned to Applicant if a lease is not executed.

- (1) Signing this application indicates that Applicant has had the opportunity to review Landlord's tenant selection criteria, which is available upon request. The tenant selection criteria may include factors such as criminal history, credit history, current income and rental history.
- (2) Applicant understands that providing inaccurate or incomplete information is grounds for rejection of this application and forfeiture of any application fee and may be grounds to declare Applicant in breach of any lease the Applicant may sign.
- (3) Applicant represents that the statements in this application are true and complete.

Applicant's Signature _____

Date _____

For Landlord's Use:

On _____, _____ (name/initials) notified

Applicant _____ by phone mail e-mail fax in person that Applicant was

approved not approved. Reason for disapproval: _____



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I, _____ (Applicant), have submitted an application to lease a property located at _____ (address, city, state, zip).

The landlord, broker, or landlord's representative is:

Century 21 APD Associates (name)
6601 Montana Ave. Suite J (address)
El Paso, TX 79925 (city, state, zip)
(915)779-5611 (phone) (915)771-0520 (fax)
lmadrid@century21apd.com (e-mail)

I give my permission:

- (1) to my current and former employers to release any information about my employment history and income history to the above-named person;
(2) to my current and former landlords to release any information about my rental history to the above-named person;
(3) to my current and former mortgage lenders on property that I own or have owned to release any information about my mortgage payment history to the above-named person;
(4) to my bank, savings and loan, or credit union to provide a verification of funds that I have on deposit to the above-named person; and
(5) to the above-named person to obtain a copy of my consumer report (credit report) from any consumer reporting agency and to obtain background information about me.

Applicant's Signature

Date

Note: Any broker gathering information about an applicant acts under specific instructions to verify some or all of the information described in this authorization. The broker maintains a privacy policy which is available upon request.