Martex Rentals

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Rental Application

Date of Application:						
Property Address:		Unit No:				
Applicant						
	V	Aiddle Name:		_ Last Name:		
		Social Security Number:				
		Email address:				
				e State Issued:		
				State/License Plate:		
Co Applicant						
	N	Aiddle Name:		Last Name		
		Middle Name: Last Name: Social Security Number:				
				cense State Issued: State/License Plate:		
Adto IIIVIARE	-	Wodel		State/License Plate:		
Residential History						
Current Address:				Unit No:		
City, State, Zip Code:						
				Monthly Rent:		
		Landlord Phone No:				
Previous Address:				Unit No:		
City, State, Zip Code:						
Dates of residence: From	_/	To	/	Monthly Rent:		
Reason For Moving:						
		Landlord Phone No:				

Have you ever been e	evicted? Yes _	No	
If Yes, provide explan			
Have you ever broker	n a lease? yes _	NO	
If Yes, provide explan			
Employment History			
Occupation:		Employer:	
Business Address:			
Supervisor's Name:		Phone:	
Day Time Phone:	Ema	nil:	
Length of Service:		Income	;
Name:	Yrs known:	I Serve as An Emergency C Relationship:	ontact* Phone: Phone:
Name:	Yrs known:	Relationship:	Phone:
Name:	Yrs known:	Relationship:	Phone:
CERTIFY that answers	given herein are true a	ersons will be listed on the	my knowledge. Lauthoriza
irriving at a tenant dec	cision, I understand that resentation made abov	the landlord may termina	reening as may be necessary ir te any rental agreement
ignature:			Date:
ignature:			Date: