Date & Time Stamp	Date	&	Time	Stamp	
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Rental Application

Please complete the following application and return it to **The Leasing Office 1102 North Third, Abilene, TX 79601.** All items must be completed in order to determine your eligibility. **Incomplete applications will be returned**. If an item does not apply to you, please mark "N/A" on that line. Every applicant will be required to go through a formal interview before eligibility is determined.

A. Ge	neral Info	ormati	on - Plo	ease circle	one:	MR.	MRS.	MS.	MISS	
App ID:										
Name:										
Address:										
City:	State	e: Zi	p:							
Daytime 7	Γelephone	Numb	er:			E-Mail A	ddress:			_
Property 1	Name:									
Unit Size:	1BR	2BR	3BR	4BR	List D	esired Apt	t. Number (1 st , 2 nd , 3 rd	d Choice):	

B. Household Composition – List all persons, including yourself, who will be living in the apartment.

Name (List Head of Household first)	Relationship	Drivers License	Birth Date	Social Security Number
1.	Head of Household			
2.				
3.				
4.				
5.				
6.				

C. Income – All sources of regularly received monies must be listed regardless of recipient's age.

Family Member Name	Sources of Income	Amount
	Wages – Gross Monthly Amount Employer Name:	\$
	Wages – Gross Monthly Amount Employer Name:	\$
	Social Security/Pension – Gross Monthly Amount	\$
	Child Support/Alimony - Monthly Amount	\$
	Interest Income - Gross Monthly Amount (i.e., interest earned from bank accounts, CD's, stocks, bonds, etc.)	\$
	Other Monthly Income	\$

2. From: To: 2. From: To: 3. From: To: 3. From: To: 5. Other Information Do you have a Section 8 Voucher or any other type of voucher? Yes No Have you ever been evicted or served with a Notice to Quit? Yes No No Have you ever been evicted or served with a Notice to Quit? Yes No Have you ever been evicted or served with a Notice to Quit? Yes No License Plate License	D. Landiorus				
Current: From: To:	Name of Landlord	Address		Phone Number	Period Rented
2. From: To: 3. From: To: 3. From: To: 5. Other Information Do you have a Section 8 Voucher or any other type of voucher? Yes No Have you ever been evicted or served with a Notice to Quit? Yes No If yes, describe reason(s): List any vehicles that you own: Yr./Make: License Plate License Plate	1. Current:				From:
E. Other Information Do you have a Section 8 Voucher or any other type of voucher? Yes No					То:
From: To: E. Other Information Do you have a Section 8 Voucher or any other type of voucher? Yes	2.				From:
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Do you have a Section 8 Voucher or any other type of voucher? Yes	3.				From:
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Have you ever been evicted or served with a Notice to Quit? Yes No		er or any other type of yougher? Ves	No No		
List any vehicles that you own: Yr./Make: License Plate Yr./Make: License Plate Do you own a pet? Yes	•	, , , , , , , , , , , , , , , , , , ,			
List any vehicles that you own: Yr./Make: License Plate Li					
Do you own a pet? Yes No If yes, describe	If yes, describe reason(s):				
Do you own a pet? Yes No If yes, describe					
Do you own a pet? Yes No If yes, describe					
Do you own a pet? Yes No If yes, describe In case of emergency notify: Address: Relationship: Phone #: H. Signatures I certify that I received the community's Tenant Selection Policy and have read it thoroughly. Signed: Date Spouse/Co-Tenant Date Authorization I/we do hereby authorize The Hotel Wooten and its staff to contact any agencies, offices, credit bureaus, landlords, or professional references for the purpose of verifying the information I/we have provided on the application. The information provided will be used solely for the determination of my/our eligibility and admission to the housing I/we are applying for and the information that is supplied will be kept confidential. Signatures Applicant Signature Date	List any vehicles that you own:	Yr./Make:		License Plate	
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Address: Relationship: Phone #: Phone #:	Do you own a pet? Yes	No If yes, describe			
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	Applicant Signature		Date		
Co-Annicant Signature Date	Co-Applicant Signature	<u> </u>	Date		