

RDS Real Estate – Lease Application
Office - 817.439.3224 Fax - 817.439.6457 Email - leasingadmin2@rdsinvestments.com

Date: _____

Applicant #1: _____ Applicant #2: _____

Business Name: _____ TAX ID: _____

Home Address: _____

Permanent Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Business Phone: _____ Email: _____

Social Security No: _____ Applicant #2: _____

Date of Birth: _____ Applicant #2: _____

Driver's License No: _____ Applicant #2: _____

Current Employer: _____ Applicant #2: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

List your (3) previous addresses with landlord's name and phone numbers:

- (1) _____
- (2) _____
- (3) _____

Give (2) personal references with phone numbers:

- (1) _____
- (2) _____

Do you have a checking account: YES NO

Bank Name: _____ Phone No.: _____

I certify the above information is correct and complete and hereby authorize you to make any inquires you feel necessary to evaluate this rental application, including credit reports, criminal reports and prior rental histories.

Applicant Signature: _____ Spouse/Partner: _____

(FOR IDENTITY VERIFICATION A COPY OF DRIVER'S LICENSE MUST BE INCLUDED WITH APPLICATION)

Office use only:

Suite Address: _____

Use: _____

Rental Rate: _____ Sec Dep: _____ Move In: _____

Notes: _____