



Elbert Flickner – Owner/Broker
 405-844-6101 Office
 405-844-2088 Fax
 1320 E. 9th Suite 5
 Edmond, Ok 73034
www.expressrealtyok.com
expressrealty@sbcglobal.net

PROSPECTIVE TENANT – RENTAL APPLICATION

Thank you for applying to rent one of our homes.

With your application we will require an application fee of **\$35.00**, per adult (anyone 18 years or older), which is non-refundable.

This application must be accompanied by your two (2) most recent paystubs :

Upon final approval, you will need to provide us with the security deposit, to be placed in separate account. You may pay the security deposit online at www.expressrealtyok.com, under the “links” tab, or pay by money order, cashier’s check or cash at our office.

This Security Deposit is NON REFUNDABLE if you fail to move in.

Pet fees: Under 20 lbs. for 1 pet is \$225.00	Over 20 lbs. for 1 pet is \$325.00
Additional pet is \$112.00	Additional pet is \$162.00
3 Pet max unless approved by owner.	

Any **Pet Fee** made will be **NON-REFUNDABLE**.

You will be able to move in as soon as arrangements can be made. Please understand that you are accepting this property in “**AS-IS**” condition and all systems and appliances should be in working order. If there is any necessary appliance that is causing you problems, we will work as quickly as possible to have items checked on or repaired (built-in stove, oven, microwave, dishwasher, garbage disposal. Washer, dryer, and refrigerator optional). It will be up to the owner if they want to repair or replace appliances.

Signature of Applicant

Date

Signature of Applicant

Date

*****Please allow a minimum of three (3) business days from the time we receive your application for processing. *****



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Request for Rental Verification

Prospective Tenant: PLEASE ONLY SIGN BELOW:

I hereby authorize Express Realty, Inc. to obtain prior rental verification for myself from my prior landlord.

 Signature of Applicant Date

 Signature of Applicant Date

 Signature of Applicant Date

TO BE COMPLETED BY CURRENT LANDLORD

Landlord Name: _____ Phone: _____

Please provide the following rental information for:

Name(s) on Lease:

Monthly Rental Rate: \$ _____

Lease Term: _____ to _____

How many times late: _____

Do they have pets? Yes No

Judgments or Evictions: Yes No

Would you lease to them again? Yes No

 Completed by Title Date

Please fax back to (405) 844-2088



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Application date: _____ Property Address: _____
 Move In Date: _____ Rent Amount \$: _____

Applicant Information			
Name:		Email Address:	
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Monthly payment or rent:	How long?	
Previous address:			
City:	State:	ZIP Code:	
<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Monthly payment or rent:	How long?	
Have you ever been evicted or broken a lease? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Why are you leaving your current residence?			
Have you ever been charged with, convicted of, or pled guilty or no contest to a felony charge? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been sued for non-payment of rent or damages to rental property/ <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever broken a rental agreement or lease contract? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been sued for any other type of monetary obligations? <input type="checkbox"/> Yes <input type="checkbox"/> No?			
Employment Information			
Current employer:		How long?	
Employer address:			
City:	State:	Zip Code:	
Phone:		Fax:	
Position:	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual income:	
If less than one year, previous employer:			
Employer Address:		How Long?	
City:	State:	Zip Code:	
Positions:	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual income:	
Emergency Contact			
Name of person not residing with you:			
Address:			
City:	State:	Zip Code:	Phone:
Relationship:			
References (reference non-related to application)			
Name:	Address:	Phone:	
Name:	Address:	Phone:	
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.			
Signature of applicant:		Date:	



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Co-Applicant Information			
Name:		Email Address:	
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Monthly payment or rent:	How long?	
Previous address:			
City:	State:	ZIP Code:	
Have you ever been evicted or broken a lease? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Why are you leaving your current residence?			
Have you ever been charged with, convicted of, or pled guilty or no contest to a felony charge? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been sued for non-payment of rent or damages to rental property/ <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever broken a rental agreement or lease contract? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been sued for any other type of monetary obligations? <input type="checkbox"/> Yes <input type="checkbox"/> No?			
<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Monthly payment or rent:	How long?	
Co-Applicant Employment Information			
Current employer:		How long?	
Employer address:			
City:	State:	Zip Code:	
Phone:		Fax:	
Position:	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual Income:	
If less than one year, previous employer:			
Address:		How Long?	
City:	State:	Zip Code:	
Positions:	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual income:	
Co-Applicant Information			
Name:		Email Address:	
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Monthly payment or rent:	How long?	
Previous address:			
City:	State:	ZIP Code:	
Have you ever been evicted or broken a lease? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Why are you leaving your current residence?			
Have you ever been charged with, convicted of, or pled guilty or no contest to a felony charge? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been sued for non-payment of rent or damages to rental property/ <input type="checkbox"/> Yes <input type="checkbox"/> No			

Have you ever broken a rental agreement or lease contract? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been sued for any other type of monetary obligations? <input type="checkbox"/> Yes <input type="checkbox"/> No?			
<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Monthly payment or rent:	How long?	
Co-Applicant Employment Information			
Current employer:		How long?	
Employer address:			
City:	State:	Zip Code:	
Phone:		Fax:	
Position:	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual income:	
If less than one year, previous employer:			
Address:		How Long?:	
City:	State:	Zip Code:	
Positions:	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual income:	
Co-Applicant References (reference non-related to Co-Applicant)			
Name:	Address:	Phone:	
Name:	Address:	Phone:	
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.			
Signature of co-applicant:		Date:	
Signature of co-applicant:		Date:	
Bank References			
Bank Name:	Bank Phone Number:	Account Type:	
Bank Address:			
City:	State:	ZIP Code:	
Bank Name:	Bank Phone Number:	Account Type:	
Bank Address:			
City:	State:	Zip Code:	
Credit References			
Credit Ref:	Account #:	<input type="checkbox"/> Open <input type="checkbox"/> Closed	
Credit Ref:	Account #:	<input type="checkbox"/> Open <input type="checkbox"/> Closed	
Credit Ref:	Account #:	<input type="checkbox"/> Open <input type="checkbox"/> Closed	
Emergency Contact			
Name:	Relationship:	Phone:	
Address:	City:	State:	Zip:
Name:	Relationship:	Phone:	
Address:	City:	State:	Zip:
Occupants of Property			
Name:	Relationship:	Age:	
Name:	Relationship:	Age:	
Name:	Relationship:	Age:	
Name:	Relationship:	Age:	
Name:	Relationship:	Age:	



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Vehicle(s) Information

Make:	Model:	Color:	Year:	License:
Make:	Model:	Color:	Year:	License:
Make:	Model:	Color:	Year:	License:
Make:	Model:	Color:	Year:	License:
Do you have any pets? <input type="checkbox"/> Yes <input type="checkbox"/> No		How many pets?	What Kind? <input type="checkbox"/> Cat <input type="checkbox"/> Dog	Where?
Do you use any tobacco products? <input type="checkbox"/> Yes <input type="checkbox"/> No				
What tobacco products do you use?				
Do you, or have you in the past three (3) years, used any controlled substance illegally? <input type="checkbox"/> Yes <input type="checkbox"/> No				

This application must be signed by **all** adults who will occupy the property before it can be considered by Landlord. Acceptance of this application and any monies deposited herewith, is not binding upon Landlord until approved by Landlord in writing. If approved, all deposit money with this application will be held as a reservation deposit to be either returned to applicant (if not approved for leasing) or credited toward any deposit which may be required of the applicant at the time a rental agreement is executed. If the applicant withdraws their application, and the property was being held for applicant with a deposit, the deposit will be forfeited to the Landlord.

With your application we will require an application fee of **\$35.00**, per adult (anyone 18 years or older), which is non-refundable.

I authorize the verification of the information provided on this form as to my credit and employment.

Signature of Applicant:	Date:
Signature of Co-applicant:	Date:
Signature of Co-applicant:	Date:

I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application for a house and does not constitute a rental or lease agreement in whole or part. I further understand that there is a non-refundable fee to cover the cost of processing my application. I am not entitled to a refund even if I don't get the house. Any questions regarding rejected applications must be submitted in writing and accompanied by a self-addressed stamped envelope.

Signature: _____ **Date:** _____

It is understood that in the conduct of this business, BROKER offers all of its services to rent, lease, sell or manage with out regard to race or color, national origin, religion, gender, familial status (including children under the age of eighteen (18) living with parents or legal custodians; pregnant woman and people securing custody of children under eighteen (18)).