

Regional Capital Holding

20888 Cochran Road
P.O. Box 126
Prairie View, Texas 77446

Property Manager:
Leasing Office: Tel: 832 800-2315

Rental Application Form

Full Name: _____
Home Address: _____
City/State/Zip: _____
Drivers License#: _____
Address on ID: _____
City/State/Zip#: _____

Social Security#: _____
Birthday: _____
Height & Weight: _____
Sex, Eyes/Hair Color: M__ F__ Eye _____ Hair _____
Marital Status: _____
Are You a Citizen: Y__ N__ Other _____

Cell Phone#: _____
Home Phone#: _____
Email Address: _____

Name of Apartment you Live at Now: _____
Current Manager's Name: _____
Their Phone#: _____
Move In Date: _____

Present Employer: _____
Address: _____
Work Phone: _____
Position: _____

Gross Monthly Income: _____ Date You Began Work: _____
Supervisor's Name: _____ Phone#: _____

Emergency Contact: _____ Cell#: _____
Referred By: _____ Cell#: _____

Criminal History: Have you ever been arrested, or convicted of a felony: _____
A background check is a part of our application process and we may need to discuss more facts before making a decision. Empty Eye does not rent our apartments to anyone with a convicted felony.

I authorize Empty Eye to share the above information with owner's Electric Provider, and Credit Bureau. I authorize Empty Eye to obtain work history, and employer statements, which will be used for the approval of this application. You must provide proof of identity by providing a copy of your government issued ID.

Signature: _____ Print _____ Date: _____

Lease Term-From: _____
Lease Term-To: _____
College Attending _____
College Location _____

Do You Have a Cosigner: Y__ N__
Cosigner's Name: _____
Cosigner's Cell#: _____
Do You Have a Roommate: _____
Roommate's Name: _____
Roommate's Cell#: _____

Requesting A Roommate: Y__ N__
RM Gender: _____
RM Approx. Age: _____