



Application Fax Packet

Fax

To: Frontline Property Management

From:

Fax: 817-288-5511

Pages:

Phone: 817-377-3190

Date:

Re: Application

cc:

Urgent **For Review** **Please Comment** **Please Reply** **Please**

Recycle

● **Comments:** The information contained in this facsimile message and any attachments to this message are intended for the exclusive use of the addressee(s) and may contain confidential or privileged information. If you are not the intended recipient, please notify the sender at the above contact information immediately and destroy all copies of this message and any attachments.

Please find attached the following required documents:
(Please check off each required item as you compile your documents to fax)

- Application, if not filled out online**
- Application Addendums**
- Copy of government issued identification**
- Copy of social security card**
- Copy of most recent pay stub, or other official income verification**
- Authorization to Release Information (below)**
- Rental Application Terms and Conditions (below)**

**Authorization to Release Information Related to a Residential Lease
Applicant**

Texas Association of REALTORS, Inc. 2007

I, _____ (Applicant), have submitted an application to lease the property located at _____ (address, city, state, zip.)

The landlord, broker, or landlord's representative is:

Frontline Property Management
5601 Bridge St. #504
Fort Worth, TX 75612
817-377-3190 (phone) 817-288-5511 (fax)

I give my permission:

1. to my current and former employers to release any information about my employment history and income history to the above-named person;
2. to my current and former landlords to release any information about my rental history to the above-named person;
3. to my current and former mortgage lenders on property that I own or have owned to release information about my mortgage payment history to the above-named person;
4. to my bank, savings and loan, or credit union to provide a verification of funds that I have on deposit to the above-named person; and
5. to the above-named person to obtain a copy of my consumer report (credit report) from any consumer reporting agency and to obtain background information about me.

Applicant's Signature

Date

Note: Any broker gathering information about an applicant acts under specific instructions to verify some or all of the information in this authorization. The broker maintains a privacy policy which is available upon request.