# SENDERO APARTMENTS LLC. <a href="mailto:Rental Application">Rental Application</a>

Date:		
Name of Applicant(s):		
Date of Birth:		
Driver's License No.: _		State of DL:
Present Address:		
City:	State:	Zip Code:
Email address		
Telephone:	Cell Pho	ne:
Current Employer:		
Current Employer add		
Citv:	State:	Zip Code:

Current Employer telepho	one:
Occupation:	Length of employment:
Current Salary:	
How long have you lived a	nt present address?
Name of present landlord	<b>:</b>
Telephone:	
Have you ever been evicte	ed?yesno
How many will be living in	n this unit?
Adults:Ch	nildren:
*Please note ONLY 4 persincludes applicant. No pet	sons are allowed per unit. This is allowed.*
	ing in unit along with cell phone
number (if applicable). Adult 1:	Cell phone #
Adult 2:	Cell phone #
Adult 3:	Cell phone #
Number of children that v	would be living in the apartment?

## **Vehicle Information:** Make \_\_\_\_\_ Model \_\_\_\_ Color\_\_\_\_\_ **(1)** License Plate #\_\_\_\_\_ Make \_\_\_\_\_ Model\_\_\_\_ Color\_\_\_\_ **(2) License Plate #\_\_\_\_\_** Three References: (1) Name: \_\_\_\_\_ **Address:** \_\_\_\_\_\_ **Telephone #:** \_\_\_\_\_ Relationship: Name: \_\_\_\_\_ **(2)** Address: **Telephone #:** \_\_\_\_\_ Relationship: **(3)** Name: \_\_\_\_\_ **Address:** \_\_\_\_\_ **Telephone #:** \_\_\_\_\_

Relationship:

### Application is subject to approval from landlord.

Date:	
Applicant's name:	
Applicant's signature: _	

#### **NOTE:**

ALONG WITH THE APPLICATION, PLEASE PROVIDE COPIES OF OFFICIAL DRIVER LICENSES OF ALL ADULTS OR OFFICIAL STATE IDENTIFICATIONS, AS WELL AS COPIES OF LAST THREE CHECK STUBS OF ALL ADULTS WHO RECEIVE PAYCHECKS.

## YOUR APPLICATION AND DOCUMENTS CAN BE EMAILED TO

Info@senderoapartments.com OR senderoapartmentsLLC@gmail.com
PLEASE NOTIFY ME AT 956-278-2744
,PRIOR TO SENDING
ANY DOCUMENTS
THANKS.
JAQUELINE & GRISELDA GUERRA
Managers