



TEXAS ASSOCIATION OF REALTORS®

# REQUEST FOR EMPLOYMENT VERIFICATION

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS® IS NOT AUTHORIZED.  
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To: \_\_\_\_\_ (Employer) Date: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

From: \_\_\_\_\_

Re: Lease Applicant: \_\_\_\_\_

The above-referenced Lease Applicant has made application to lease a property from the undersigned prospective Landlord. The Lease Applicant reported that he is employed with your company. Enclosed is an authorization to release employment information. Please provide the following:

- (1) Beginning date of employment \_\_\_\_\_
- (2) Monthly Gross Income \$ \_\_\_\_\_
- (3) Position currently held \_\_\_\_\_
- (4) Other relevant information: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Title of Person Completing Form \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_

Please return this form **as soon as possible** to:

FBM Property Management \_\_\_\_\_ ( Property Manager  Landlord)

(972) 878-7368 \_\_\_\_\_ (phone) \_\_\_\_\_ (fax)

\_\_\_\_\_ (e-mail)

Enclosure: Page 4 of TAR No. 2003 *Authorization to Release Information Related to a Residential Lease Applicant*