



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.
©Texas Association of REALTORS®, Inc. 2009

To: _____ (Employer) Date: _____

Fax Number: _____ Phone Number: _____

From: Mustang Property Management, LLC and/or Mustang Realty Group, LLC

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:

Mustang Property Management, LLC (Property Manager Landlord)

(214) 393-3970 (phone) (214) 550-0540 (fax)

schulgen@mustangrealty.com (e-mail)

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