

Alliance Residential Management

2400 Augusta Dr., Suite 450
Houston, Texas 77057

APPLICATION FOR RESIDENCY

(Each occupant must submit a separate application)

DATE _____	APT. TYPE _____
APT. # _____	MOVE-IN DATE _____
MONTHLY RENT _____	LEASE DATES _____
SOURCE _____	MOVE-IN RENT AMOUNT _____
COMMENTS _____	LC INITIALS _____

APPLICANT'S NAME _____ DATE OF BIRTH _____ SS# _____
 First Middle Last

SPOUSE/ROOMMATE NAME _____ DATE OF BIRTH _____ SS# _____
 First Middle Last

MARITAL STATUS _____ DRIVER'S LICENSE # _____ SPOUSE/ROOMMATE DRIVER'S LICENSE # _____

Other Occupants	NAME _____ AGE _____ DATE OF BIRTH _____	NAME _____ AGE _____ DATE OF BIRTH _____
	NAME _____ AGE _____ DATE OF BIRTH _____	NAME _____ AGE _____ DATE OF BIRTH _____

PRESENT ADDRESS _____
 Street Apt # City State Zip

DATES: FROM-TO _____
 Present Landlord/Resident Mgr. Apt. Community/Mortgage Co. & Loan # Phone #

MONTHLY PAYMENT _____ REASON FOR MOVING _____ HOME # _____

PREVIOUS ADDRESS _____
 Street Apt # City State Zip

PREVIOUS APT. NAME OR LANDLORD _____ ADDRESS _____

MONTHLY PAYMENT _____ PHONE # _____ HOW LONG? _____

HAS APPLICANT OR SPOUSE EVER BEEN EVICTED FROM ANY LEASED PREMISES? _____ IF YES, EXPLAIN _____

PRESENT EMPLOYER _____ POSITION _____

BUSINESS ADDRESS _____ BUSINESS PHONE # _____
 Street City State Zip

SUPERVISOR _____ EMPLOYED SINCE _____

PREVIOUS EMPLOYER _____ POSITION _____

BUSINESS ADDRESS _____ BUSINESS PHONE # _____
 Street City State Zip

SUPERVISOR _____ EMPLOYED SINCE _____

SPOUSE'S EMPLOYER _____ POSITION _____

BUSINESS ADDRESS _____ BUSINESS PHONE # _____
 Street City State Zip

SUPERVISOR _____ EMPLOYED SINCE _____

AUTO TAG # & STATE _____ YEAR/MAKE/COLOR _____

SPOUSE'S TAG # & STATE _____ YEAR/MAKE/COLOR _____

DO YOU OWN A MOTORCYCLE, BOAT, COMMERCIAL VEHICLE, CAMPER, TRAILER, ETC.? (IF SO, TYPE & TAG #) _____

Miscellaneous	PERSONAL EMERGENCY CONTACT:		
	NAME _____	RELATIONSHIP _____	
	ADDRESS _____	HOME PHONE # _____	BUS. PHONE # _____
	PERSONAL REFERENCE _____	PHONE # _____	BUS. PHONE # _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? APPLICANT YES NO SPOUSE YES NO

Banking	CHECKING ACCOUNT # _____	BANK NAME AND BRANCH _____	PHONE # _____
	SAVINGS ACCOUNT # _____	BANK NAME AND BRANCH _____	PHONE # _____
	TOTAL ANTICIPATED INCOME FROM DATE OF MOVE-IN THROUGH THE NEXT 12 MONTHS (MUST PROVIDE CHECK STUB)		
	*ANNUAL SALARY (INCLUDING FEES, TIPS, COMMISSIONS, AND BONUSES) _____		
	*ANNUAL SALARY (SPOUSE)	+	_____
	**ADDITIONAL ANNUAL INCOME (CHILD SUPPORT, STOCKS, SAVINGS, INVESTMENTS, ETC)	+	_____
	SOURCE _____	+	_____
	TOTAL ANTICIPATED INCOME	=	_____

*IF SELF EMPLOYED, WE MUST BE FURNISHED WITH YOUR MOST RECENT TAX RETURN

****YOU MUST FURNISH US WITH A NOTARIZED STATEMENT OF THIS INCOME.**

HOW DID YOU HEAR ABOUT OUR COMMUNITY? _____

The undersigned warrants and represents the information on this Application to be true and correct. All persons and firms named may freely give any requested information concerning me and I hereby waive all right of action for any consequence resulting from such information. The undersigned hereby authorizes Alliance Residential Management to release all information contained in this Application on behalf and for the benefit of the undersigned. I understand that Alliance Residential Management may obtain a background report, including information as to my credit and criminal history, in connection with my Application and that my Application may be rejected based on information contained in the reports.

I hereby leave the following with as a good faith payment in connection with this Application:

	Required Amount	Amount Paid	Date Paid
Non-Refundable Application Fee	\$ _____	\$ _____	_____
Non-Refundable Admin. Fee	\$ _____	\$ _____	_____
Reservation Fee (Security Deposit)	\$ _____	\$ _____	_____
Pet Deposit	\$ _____	\$ _____	_____
Non-Refundable Pet Fee	\$ _____	\$ _____	_____
Other _____	\$ _____	\$ _____	_____
Total	\$ _____	\$ _____	_____

If my application is accepted, I understand that, upon execution of the lease, the Reservation Fee (Security Deposit) will become my refundable security deposit pursuant to the terms of the lease. If, for any reason, Alliance Residential Management decides to decline my Application, then Alliance Residential Management will refund fees with the exception of the Application Fee and Admin. Fee. Non-refundable fees are not part of the Security Deposits.

If Applicant cancels this Application after 72 hours or refuses to occupy the premises on the agreed upon date, then Applicant acknowledges, understands and agrees that the Pet Deposit and Non-refundable Pet Fee will be refunded, the Non-refundable Application Fee and Non-refundable Leasing Fee will not be refunded, and ARM shall retain the Reservation Fee (Premises) as liquidated damages. Applicant further acknowledges that the injury caused by the cancellation or refusal to occupy is difficult or impossible of accurate estimation; that and Applicant intend to provide for damages rather than for a penalty; and, that the retention of the Reservation Fee (Premises) is a reasonable pre-estimate of the community's loss.

Applicant's Signature _____ Spouse's Signature _____

MANAGER'S APPROVAL _____ Date _____