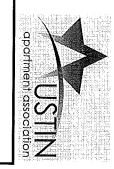


Rental Application for Residents and Occupants
Each co-resident and each occupant over 18 must submit a separate application.

Spouses may submit a joint application.

Date when filled out:

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Spouse's signature	The state of the s
authorize (owner's name) to: (1) share the above information with owner's electric provider, and (2) verify, by all available means, the above, including reports from consumer reporting agencies before, during and after tenancy on matters relating to my lease, and income history and other information reported by employer(s) to any state employment security agency (e.g., Texas Workforce Commission). Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application. Applicant's signature	YOUR RENTAL/CRIMINAL HISTORY You, your spouse, or any occupant listed in this Application ever: □ been evicted or asked to move out? □ moved out of a dwelling before the end of the lease term without the owner's consent? □ declared bankruptcy? □ been sued for rent? □ been sued for property damage? □ been charged, detained, or arrested for a felony or sex crime that was resolved by conviction, probation, deferred adjudication, court-ordered community supervision, or pretrial diversion? □ been charged, detained, or arrested for a felony or sex-related crime that has not been resolved by any method? Please indicate below the year, location and type of each felony and sex crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before making a decision. You represent the answer is "no" to any item not checked above.
you are seriously in or injured, you authorize us to call EMS of send for an ambulance at your expense. We're not legally obligated to do so.	Past credit problems you want to explain. (Use separate page.)
child, we may allow such person(s) to enter your dwelling to remove all contents, as well as your property in the mailbox, storerooms, and common areas. If no box is checked, any of the above are authorized at our option. If	Other non-work income you want considered. Please explain:
If you die or are seriously ill, missing, or incarcerated according to an affidavit of [check one or more] □ the above person, □ your spouse, or □ your parent or	List major credit cards:
Cell phone: ()	YOUR CREDIT HISTORY Your bank's name, city, state:
ip:	Previous supervisor's name and phone:
Name: Address:	Gross monthly income was over: \$
EMERGENCY Emergency contact person over 18, who will not be living with you:	Work phone: ()
Other:	City/State/Zip:
1	Previous employer (most recent): Address:
Did you find us on your own? \square Yes \square No If yes, fill in information below:	Supervisor's name and phone:
Name of friend or other passon:	
Name of locator or rental agency:	Position: Your gross monthly income is over: \$
YOU RENTED HERE Were you referred? D Vo D No. 12.00	Work phone: ()
Year: License #: State:	City/State/Zip:
Year: License #: State:	L
model and color:	resent employer
Make, model and color: Year: Year:	Date you moved in: Date you moved out:
(including cars, trucks, motorcycles, trailers, etc.). Continue on separate page if more than three.	ve owner or manage
CLES	Apartment name:
Sex:DL or govt. 1D card # and state:	
	r revious nome address (most recent): Apt. #:
Birthdate: Social Security #:	Previous hammed dues (most second).
DL or govt. ID card # and state:	wny are you leaving your current residence?
	Their phone: Date moved in:
Sex: DL or govt. LD card # and state:	Current owner or manager's name:
Relat	Name of apartment where you now live:
OTHER OCCUPANTS Names of all persons under 18 and other adults who will occupy the unit without signing the lease. Continue on separate page if more than three.	Home/cell phone: () Current rent: \$ Email address:
Supervisor's name and phone:	City/State/Zip:
Date began job: Gross monthly income is over: \$	Current home address (where you now live): Apt. #:
Work phone: () Cell phone: ()	Are you a U.S. citizen? ☐ Yes ☐ No Do you or any occupant smoke?☐ yes ☐ no Will you or any occupant have an animal? ☐ yes ☐ no
Address:	Marital Status: □ single □ married □ divorced □ widowed □ separated
Ì	Birthdate: Height: Weight: Weight: Hair color:
you a U.S. ci	al Security #:
Birthdate: Height: Weight: Weight	Former last names (maiden and married):
OR govt. photo ID card #:	OR goat photo II card #-
Driver's license # and state:	7
Spouse's Social Security #:	Your street address (as shown on your driver's license or government ID card):
YOUR SPOUSE Full name:	ABOUT YOU Full name (exactly as on driver's license or govt. ID card)

Contemplated Lease Contract Information

To be filled in only if the Lease Contract is not signed by resident(s) at time of application for rental.

must be the latest version of (check and):

the Approximant I are the Desident II are the Deside

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Apt. name or owening address (street, city): Person accepting application: Person processing application: Date that applicant or co-applicant was notified by □ telephone, □ letter, or □ i (Deadline for applicant and all co-applicants to sign lease is three days after no	PRICE USE ONLY	ignature of Spouse: ignature of Owner's Representative:	pplicant's Signature:	Right to Review the Lease. Before you submit an application or pay any fees or Contract, as well as any community rules or policies we have. You may also consult We will not take a particular dwelling off the market until we receive a complete dwelling. Additional provisions or changes may be made in the Lease Contract if Lease Contract after it is fully signed.	re that all your statements on the first page of t porting agencies and other rental housing own as your application may be denied, such as cre ental selection criteria or if you fail to answe we fees, and deposits as liquidated damages hal offense. In lawsuits relating to the application n costs. We may at any time furnish information in costs. We may at each favorable and unfavorable, including both favorable and unfavorable and unfavorable and grant and the section of signatures are legally binding. You ack	you are seriously ill or injured, what doctor may we notify? (We are not responsible for providing medical information to doctors ame: Phone: () uportant medical information in emergency:	7. If You Withdraw Before Approval. You and any co-applicants may not withdraw your Application or the application deposit. If, before signing the Lease Contract, you or any co-applicant withdraws an Application or notifies us that you be changed your mind about renting the dwelling unit, we'll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligation to each other.	Ä	ببر		H	<u></u>		9	00		payment site; X at 705 W. 24th Street Ste. C;	ling unit \$	ty deposit \$; Animal ccess devices for unit.	Number of days notice for termination 30 ;	 Our consent necessary for guests staying longer than days; Beginning date and ending date of Lease Contract 		 Names of all other occupants not signing Lease Contract (persons under age 18, relatives, friends, etc.) 		ame		Name of Owner/Lessor
Unit # or type: Phone: () Phone: () Phone: () person of \(\text{acceptance or } \text{acceptance:} \) Iffication of acceptance in person or by telephone, five days if by mail)		Date:	Date:	fees or deposits, you have the right to review the Rental Application and Lease of consult an attorney. These documents are binding legal documents when signed completed application and any other required information or monies to rent that ntract if agreed to in writing by all parties. You are entitled to an original of the	authorize authorize ortunity in ortunity in ortunity in ortunity in ortune, and review may regover rental howith the I with the I e to you.	e for providing medical information to doctors or emergency personnel.) Phone: ()	Total amount of money we've received to this date: \$ 5. Signature. Our representative's signature indicates our acceptance only of the above application agreement. It does not bind us to accept applicant or to sign the proposed Lease Contract.	ns have been paid in mil. Receipt. Application fee (may or may not be Application deposit (may or may not be re Administrative fee (refundable only if not Total of above fees and application deposit	Keys or Access Devices. We'll furnish ke after: (1) all parties have signed the con other rental documents; and (2) all appliate the bare bear and feet felt.	holiday, the deadline will be extended to the end of the next business day. Notice to or from Co-applicants. Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.	blank) of such disapproval. Refund chec co-applicants and mailed to one applicant. Extension of Deadlines. If the deadline for under paragraphs 6, 9, or 10 falls on a Satur	not assume approval until you receive actu. Refund after Nonapproval. If you or a or deemed disapproved under paragrap or deemed disapproved under paragrap deposits within	Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within seven days after we have received a completed Application. Notification may be in person or by mail or telephone unless you have requested that notification be by mail You must	has been paid to us; \(\sigma\) an application depitem is checked, all are necessary for the Applic Nonapproval in Seven Days. We will approved within seven days after the	Completed Application. An Application will not be considered "completed" and will not be processed until all of the following have been provided to us (unless checked): a separate Application has been fully filled out and signed by you and each co-applicant; an application fee	Agreement	Special reports: Special provisions regarding parking, storage, etc. (see attached page, if	plant fertilization, \(\sigma\) trash receptacles. If not checked, applicant will be responsible for the first \(\frac{\pi}{2}\)	paragraph 26 of the Lease Contract for D lawn/plant maintenance, lawn/plant watering, D picking up trash from grounds, D lawn/	Lost day of month, or C exact day designated in move-out notice; If Availing unit is home or dual to successful to	one check pointy payable to all residents (detault), Ok one check payable and mailed to	curity deposit refund check will be by:	 You are (check one): required to buy insurance or not required to buy insurance Agreed reletting charge ; 	n charge \$	 Utilities paid by owner (check all that apply): □ electricity, □ gas, □ water □ wastewater, □ trash, □ cable TV, □ master antenna, □ Internet, 	 Animal violation charges: Initial \$ 100.00 ; Daily \$ 10.00 Check if the dwelling is to be furnished: 	• Returned-check charge \$ 50.00; Daily late charge \$ 10.00;