



# Rental Application for Residents and Occupants

TEXAS APARTMENT ASSOCIATION

Each co-resident and each occupant over 18 must submit a separate Application.

M E M B E R

Date when filled out: \_\_\_\_\_

## ABOUT YOU

Full name (exactly as it appears on driver's license or govt. ID card) \_\_\_\_\_

Former name (if applicable) \_\_\_\_\_

Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's license # \_\_\_\_\_ State \_\_\_\_\_

Government ID # \_\_\_\_\_ State (if applicable) \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_ Email address \_\_\_\_\_

Marital status  single  married U.S. citizen?  yes  no Do you or does any occupant smoke?  yes  no

I am applying for the apartment located at \_\_\_\_\_

Is there another co-applicant?  yes  no

Co-applicant name \_\_\_\_\_ Email \_\_\_\_\_

Co-applicant name \_\_\_\_\_ Email \_\_\_\_\_

Co-applicant name \_\_\_\_\_ Email \_\_\_\_\_

Co-applicant name \_\_\_\_\_ Email \_\_\_\_\_

## OTHER OCCUPANTS

Full name \_\_\_\_\_ Relationship \_\_\_\_\_

Birthdate \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's license # \_\_\_\_\_ State \_\_\_\_\_

Government ID # \_\_\_\_\_ State (if applicable) \_\_\_\_\_

Full name \_\_\_\_\_ Relationship \_\_\_\_\_

Birthdate \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's license # \_\_\_\_\_ State \_\_\_\_\_

Government ID # \_\_\_\_\_ State (if applicable) \_\_\_\_\_

Full name \_\_\_\_\_ Relationship \_\_\_\_\_

Birthdate \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's license # \_\_\_\_\_ State \_\_\_\_\_

Government ID # \_\_\_\_\_ State (if applicable) \_\_\_\_\_

Full name \_\_\_\_\_ Relationship \_\_\_\_\_

Birthdate \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's license # \_\_\_\_\_ State \_\_\_\_\_

Government ID # \_\_\_\_\_ State (if applicable) \_\_\_\_\_

## WHERE YOU LIVE

Current home address (where you live now) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Do you  rent or  own? Beginning date of residency: \_\_\_\_\_ Monthly payment \$ \_\_\_\_\_

Apartment name \_\_\_\_\_

Name of owner or manager \_\_\_\_\_

Phone \_\_\_\_\_ Reason for leaving \_\_\_\_\_

**(The following is only applicable if at current address for less than 6 months.)**

Previous home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Do you  rent or  own? Dates: From \_\_\_\_\_ To \_\_\_\_\_ Monthly payment \$ \_\_\_\_\_

Apartment name \_\_\_\_\_

Name of owner or manager \_\_\_\_\_

Phone \_\_\_\_\_ Reason for leaving \_\_\_\_\_

## YOUR WORK

Current employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work phone \_\_\_\_\_ Beginning date of employment \_\_\_\_\_

**YOUR WORK, continued**

Gross monthly income \$ \_\_\_\_\_ Position \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

**(The following is only applicable if at current employer for less than 6 months.)**

Previous employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work phone \_\_\_\_\_ Dates: From \_\_\_\_\_ To \_\_\_\_\_

Gross monthly income \$ \_\_\_\_\_ Position \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

**ADDITIONAL INCOME****(Income must be verified to be considered.)**

Type \_\_\_\_\_ Source \_\_\_\_\_ Gross monthly amount \$ \_\_\_\_\_

Type \_\_\_\_\_ Source \_\_\_\_\_ Gross monthly amount \$ \_\_\_\_\_

**CREDIT HISTORY**

If applicable, please explain any past credit problem: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CRIMINAL HISTORY****Check only if applicable.**

Have you 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 convicted or received probation (other than deferred adjudication) for a felony or sex crime?

Please indicate below the year, location, and type of each felony or sex crime for which you were convicted or received probation. We may need to discuss more facts before making a decision. You represent the answer is "no" to any item not checked above.

\_\_\_\_\_

\_\_\_\_\_

**HOW DID YOU FIND US?** Online search (website address) \_\_\_\_\_ Referral from a person or locator? Name \_\_\_\_\_ Social media (please be specific) \_\_\_\_\_ Other \_\_\_\_\_**EMERGENCY CONTACT****Emergency contact person over 18 who will not be living with you:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

**YOUR VEHICLES***(If applicable)***List all vehicles owned or operated by you or any occupants (including cars, trucks, motorcycles, trailers, etc.)**

Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

**YOUR ANIMALS***(if applicable)*

You may not have any animal in your unit without management's prior authorization in writing. If we allow your requested animal, you must sign a separate animal addendum, which may require additional deposits, rents, fees or other charges.

Kind \_\_\_\_\_ Weight \_\_\_\_\_

Breed \_\_\_\_\_ Age \_\_\_\_\_

Kind \_\_\_\_\_ Weight \_\_\_\_\_

Breed \_\_\_\_\_ Age \_\_\_\_\_

### Application Agreement

The following Application Agreement will be signed by you and all co-applicants prior to signing a Lease. While some of the information below may not yet apply to your situation, there are some provisions that may become applicable prior to signing a Lease. In order to continue with this Application, you'll need to review the Application Agreement carefully and acknowledge that you accept the terms.

1. **Apartment Lease information.** The Lease contemplated by the parties will be the current TAA Lease. Special information and conditions must be explicitly noted on the Lease.
2. **Approval when Lease is signed in advance.** If you and all co-applicants have already signed the Lease when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease, and then credit the application deposit of all applicants toward the required security deposit.
3. **Approval when Lease isn't yet signed.** If you and all co-applicants have not signed the Lease when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit.
4. **If you fail to sign Lease after approval.** Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval. If you or any co-applicant fails to sign as required **your Application will be deemed withdrawn**, and we may keep the application deposit as liquidated damages, and terminate all further obligations under this Agreement.
5. **If you withdraw before approval.** If you or any co-applicant withdraws an Application or notifies us that you've 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.
6. **Approval/non-approval.** If we do not approve your Application within 7 days after the date we received a completed Application, your Application will be considered "disapproved." Notification may be in person or by mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 7-day time period may be changed only by separate written agreement.
7. **Refund after non-approval.** If you or any co-applicant is disapproved or deemed disapproved under Paragraph 6, we'll refund all application deposits within 30 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
8. **Extension of deadlines.** If the deadline for approving or refunding under paragraphs 6 or 7 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next business day.
9. **Keys or access devices.** We'll furnish keys and/or access devices only after: (1) all parties have signed the Lease and other rental documents referred to in the Lease; and (2) all applicable rents and security deposits have been paid in full.
10. **Application submission.** Submission of an Application does not guarantee approval or acceptance. It does not bind us to accept the applicant or to sign a Lease. Images on our website may represent a sample of a unit and may not reflect specific details of any unit. For information not found on our website regarding unit availability, unit characteristics, pricing or other questions, please call or visit our office.
11. **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-applicants is considered notice from all co-applicants.

### Disclosures

1. **Application fee (non-refundable).** You agree to pay to our representative the non-refundable application fee in the amount indicated in paragraph 3. Payment of the application fee does not guarantee that your Application will be accepted. The application fee offsets the cost of screening an applicant for acceptance.
2. **Application deposit (may or may not be refundable).** In addition to any application fees, you agree to pay to our representative an application deposit in the amount indicated in paragraph 3. The application deposit is not a security deposit. The application deposit will be credited toward the required security deposit when the Lease has been signed by all parties; OR, it will be refunded under paragraph 7 if the applicant is not approved; OR it will be retained by us as liquidated damages if you fail to sign or withdraw under paragraphs 4 and 5 of the Application Agreement.
3. **Fees due.** Your Application will not be processed until we receive your completed Application (and the completed Application of all co-applicants, if applicable) and the following fees:
  - A. Application fee (non-refundable): \$ \_\_\_\_\_
  - B. Application deposit (may or may not be refundable) \$ \_\_\_\_\_
4. **Completed Application.** Your Application will not be considered "complete" and will not be processed until we receive the following documentation and fees:
  - A. Your completed Application;
  - B. Completed Applications for each co-applicant (if applicable);
  - C. Application fees for all applicants;
  - D. Application deposit.

### Authorization and Acknowledgment

I authorize The Landings Of Carrier Pkwy.

(name of owner/agent) to obtain reports from any consumer or criminal record reporting agencies before, during, and after residency on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this Application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Application. Authority to obtain work history information expires 365 days from the date of this Application.

## Payment Authorization

I authorize The Landings Of Carrier Pkwy.

(name of owner/agent) to collect payment of the application fee and application deposit in the amounts specified under paragraph 3 of the Disclosures.

**Non-sufficient funds and dishonored payments.** If a check from an applicant is returned to us by a bank or other entity for any reason, if any credit card or debit card payment from applicant to us is rejected, or if we are unable, through no fault of our own or our bank, to successfully process any ACH debit, credit card, or debit card transaction, then:

1. Applicant shall pay a charge of \$ 35.00 for each returned payment; and
2. We reserve the right to refer the matter for criminal prosecution.

## Acknowledgment

You declare that all your statements in this Application are true and complete. **Applicant's submission of this Application, including payment of any fees and deposits, is being done only after applicant has fully investigated, to its satisfaction, those facts which applicant deems material and necessary to the decision to apply for a rental unit.** You authorize us to verify your information through any means, including consumer-reporting agencies and other rental-housing owners. **You acknowledge that you had an opportunity to review our rental-selection criteria, which include reasons your Application may be denied, such as criminal history, credit history, current income and rental history. You understand that if you do not meet our rental-selection criteria or if you fail to answer any question or give false information, we may reject the Application, retain all application fees as liquidated damages for our time and expense, and terminate your right of occupancy.** Giving false information is a serious criminal offense. In lawsuits relating to the Application or Lease, the prevailing party may recover from the non-prevailing party all attorney's fees and litigation costs. We may at any time furnish information to consumer-reporting agencies and other rental-housing owners regarding your performance of your legal obligations, including both favorable and unfavorable information about your compliance with the Lease, the rules, and financial obligations. Fax or electronic signatures are legally binding. You acknowledge that our privacy policy is available to you.

**Right to review the Lease.** Before you submit an Application or pay any fees or deposits, you have the right to review the Application and Lease, as well as any community rules or policies we have. You may also consult an attorney. These documents are binding legal documents when signed. We will not take a particular dwelling off the market until we receive a completed Application and any other required information or monies to rent that dwelling. Additional provisions or changes may be made in the Lease if agreed to in writing by all parties. You are entitled to a copy of the Lease after it is fully signed.

Images on our website may represent a sample of a unit and may not reflect specific details of any unit. For information not found on our website regarding availability, unit characteristics or other questions, please call or visit our office.

**This Application and the Lease are binding documents when signed. Before submitting an Application or signing a Lease, you may take a copy of these documents to review and/or consult an attorney. Additional provisions or changes may be made in the Lease if agreed to in writing by all parties.**

Applicant's signature

Date

## Application Fee and Payment Method

You hereby authorize a one-time payment by credit card for the total application fee due. The application fee is non-refundable. Refer to your Application for details.

Name on Application

Date of Application submission

Name of property

Name of (management) company

Credit card type

Credit card #

Exp. date (MM/YY)

Name as it appears on card

Billing address

City

State

Zip

### ACH Payment Option:

Bank account #

Bank routing #

Name of account holder

Address

City

State

Zip

### FOR OFFICE USE ONLY

1. Apt. name or dwelling address (street, city): The Landings Of Carrier Pkwy. Unit # or type: \_\_\_\_\_
2. Person accepting application: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Person processing application: \_\_\_\_\_ Phone: \_\_\_\_\_
4. Date that the applicant or co-applicant was notified  by telephone,  by letter,  by email, or  in person of  acceptance or  nonacceptance: \_\_\_\_\_  
(Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance in person or by telephone, five days if by mail.)
5. Name of person or persons notified (if there are more than one applicant, at least one of them must be notified): \_\_\_\_\_
6. Name of owner's representative who notified the applicant: \_\_\_\_\_

Additional comments: \_\_\_\_\_



QUALIFYING CRITERIA

We are delighted that you are interested in leasing a dwelling in our apartment community. In order to help you in making your decision, we have listed below the criteria for qualifying as a resident with us.

- 1. An application will not be considered "completed" and will not be processed until all of the following have been provided to us: A separate rental application must be fully completed, dated and signed by each applicant and all co-applicants. Spouses can complete one rental application. An application fee, admin fee and an application deposit have been paid to us. The application deposit is not a security deposit. However, it will be credited toward the required security deposit and move in fee when the Lease Contract has been signed. A one-time non-refundable move in fee will be deducted from your application deposit once the lease contract has been signed and the remaining deposit will be credited toward your security deposit. The application deposits are as follows:

Table with 2 columns: Application Deposit, Non-refundable move in fee. Rows include EFF/ 1 bedroom, 2 bedroom, and 3 bedroom with corresponding fees.

Application Fee: \$50.00 per Adult (Non-Refundable)

Administrative Fee: \$50.00 (May or may not be refundable)

- 2. The rental application will be reviewed when submitted so we'll have all information needed to determine your eligibility.
3. Each applicant must provide a government photo identification and Social Security Card and allow it to be photocopied.
4. Applicants who are first-time renters or who do not have sufficient income under paragraph 6 below, may qualify by having the lease guaranteed by a guarantor.
5. If applicant's family will be occupying the dwelling, the family size must be appropriate for the available apartment, i.e., no more than two adults per bedroom, in most circumstances.
6. Employment and monthly income must be verifiable. Total monthly income of all applicants must be 2.5 times monthly rent.
7. Applicant(s) may be denied occupancy for the following reasons: Falsification of application by any applicant, Incomplete application by any applicant, Insufficient income (total of all applicants), Criminal history committed by any applicant or by other occupants (including children) who plan to live in unit, Poor credit history of any applicant (credit reports are obtained), Poor rental profile of any applicant (rental history reports are obtained). Rental history of: Non-payment or frequent late payment of rent, Eviction, Bankruptcy, or Housing Debts, Drug use, Poor housekeeping, Poor supervision of applicant's children, Unruly or destructive behavior by applicant, applicant's children or applicant's guests, Violence to persons or property by applicant, applicant's children, or applicant's guests

We do not discriminate based on race, color, creed, religion, sex, national origin, disability, or familial status.

I ACKNOWLEDGE THAT I HAD AN OPPORTUNITY TO REVIEW THE PROPERTY'S RENTAL SELECTION CRITERIA, WHICH INCLUDES REASONS WHY MY APPLICATION MAY BE DENIED, SUCH AS CRIMINAL HISTORY, CREDIT HISTORY, CURRENT INCOME, AND RENTAL HISTORY. I UNDERSTAND THAT IF I DO NOT MEET THE PROPERTY'S RENTAL SELECTION CRITERIA OR IF I FAIL TO ANSWER ANY QUESTION OR GIVE FALSE INFORMATION, THE PROPERTY MAY REJECT THE APPLICATION, RETAIN ALL APPLICATION FEES, ADMINISTRATIVE FEES, AND DEPOSITS AS LIQUIDATED DAMAGES FOR ITS TIME AND EXPENSE, AND TERMINATE MY RIGHT OF OCCUPANCY.

Signature lines for Applicant, Date, Applicant, Date, Applicant, Date, Owner's Representative, Date.

LANDINGS OF CARRIER PARKWAY  
RESIDENT APPLICATION & MOVE IN- CRITERIA

We are delighted that you are interested in leasing a dwelling in our apartment community. To help you in making your decision, we have listed below the criteria for our application and move-in policies.

1. All application fees, admin fees and application deposits must be in the form of a cashier's check, money order, credit or debit card. (NO CASH IS ACCEPTED) If paying by money orders or cashier's checks application fees and admin fees need to be on 1 money order or cashier's check. The application deposit will need to be split in 2 separate payments by money orders or cashier's check.
2. The application deposit is not a security deposit, but it will be credited toward the required security deposit and to the non-refundable move in fee when the Lease Contract has been signed by all parties.
3. The Landings of Carrier Parkway is a Pet Friendly Community. We require our pets to be under 65 lbs. and a pet interview is required at time of application. Current vaccines and rabies shots will be required. The pet fee is a \$400.00 non-refundable pet fee and we charge \$10.00 pet rent each month.
4. All rental payments for 1st month's rent must be in the form of a cashier's check, money order or credit or debit card. Checks will be accepted after your first full month's rent has been paid unless otherwise noted at time of approval.
5. If your move in date is on or after the 25th of the month, the following full month's rent must be paid at time of move in. All move in dates are on Saturdays unless a written request is submitted and approved by management.
6. All residents are required to pay \$3.00 each month for pest control and \$2.00 for recycling. We charge this fee to encourage our residents to recycle and so that we may perform regular weekly pest control treatments to each unit by floor and building once per week in rotation.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

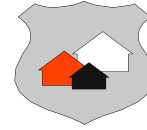
\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Representative

\_\_\_\_\_  
Date



# Addendum to Rental Application

Have you or ANYONE who will be residing with you EVER:

- Been convicted of any crime or do you have criminal charges pending?  Yes  No
- Been placed on probation, parole?  Yes  No
- Been registered as a sex offender?  Yes  No
- Been in a gang, or are you currently a member of a gang?  Yes  No
- Been involved in, or are you currently are involved in any illegal activity?  Yes  No
- Been evicted or had a forcible detainer filed against you?  Yes  No
- Been a petitioner in a case at bankruptcy court?  Yes  No
- Had a warrant, or do you currently have a warrant for your arrest?  Yes  No
- Moved to avoid eviction or because of problems with a tenant or landlord?  Yes  No

Please explain all "YES" answers in detail. (What happened, when, where and the results.)

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\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date

*Lisa Champion*  
Property Manager's Signature

\_\_\_\_\_  
Date

Landings of Carrier Parkway  
Name of Property

**The term "Crime Free Multi-Housing" in no way implies that any apartment community participating in this training and certification program is free of any crime occurring on the property. It is similar to a "Drug Free School Zone" or a "Drug Free Workplace." It simply means that crime will not be tolerated at this apartment community. It is a set of criterion that, if implemented and followed, can reduce the risk of attracting criminal behavior. It also creates a working relationship with the Grand Prairie Police Department that is beneficial to an apartment community, its residents and the police.**

**Public Information Request  
Grand Prairie Police Department  
Crime Free Multi-Housing Program**

Landings of Carrier Parkway

972-264-8917

972-266-0143

APARTMENT NAME:

BUS PHONE

FAX PHONE

In accordance with Chapter 552, Public Information, of the *Texas Government Code*, I hereby request information regarding any arrest of the following person conducted by the Grand Prairie Police Department.

FIRST NAME	MIDDLE NAME	LAST NAME
DOB: _____	RACE: B <input type="checkbox"/> W <input type="checkbox"/>	GENDER: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>
LICENSE OR ID _____	ST _____	SOCIAL SEC#: _____

CURRENT ADDRESS INCLUDING STREET, APT #, CITY, ST, ZIP, & PHONE #

**I authorize the Grand Prairie Police Department to release this arrest information to the management/leasing agent of the following Crime Free Multi-Housing Program or Crime Free Rental Property Program member. By signing this form you are allowing the Grand Prairie Police Department to release the criminal data maintained in those files.**

Applicant Signature \_\_\_\_\_ Leasing Signature Kassy Bowles

Applicant Printed Name \_\_\_\_\_ Leasing Printed Name Kassy Bowles

Under Chapter 552, Public Information the governmental body has up to 10 business days to produce the Information or explain why the information cannot be produced.

© The City of Grand Prairie and Crime Free Multi-Housing symbols cannot be copied without consent of the City of Grand Prairie. Permission to use this form is only granted to members of the Grand Prairie Crime Free Multi-Housing and Crime Free Rental Property Programs.

**THIS SECTION FOR GRAND PRAIRIE POLICE DEPARTMENT USE ONLY**

**NO ARREST RECORDS FOR NAME OR D.O.B.**

**PERSON ARRESTED FOR THE FOLLOWING:**

OFFENSE:	CASE#	DOA:
Local arrest information here	Case # if applicable	Date of arrest
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

AGENCY	WARRANTS
Agency name here	Charge of warrant
_____	_____
_____	_____

OTHER POSSIBLE CRIMINAL RECORD: YES  NO  STATE \_\_\_\_\_

OTHER INFORMATION: Misc information here \_\_\_\_\_

RECORDS CHECKED BY: \_\_\_\_\_





Supplemental Rental Application for Units Under Government Regulated Affordable Housing Programs

Date when filled out: \_\_\_\_\_

- 1. Supplemental Information. The purpose of this Supplemental Rental Application is to determine whether you qualify for affordable rental housing under a government regulated affordable housing program. It is very important that you answer all questions fully and accurately.
2. Employment Update. Present employer: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_
Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Position: \_\_\_\_\_

3. Household Composition. List all persons, including yourself, who will be living in your household.

Table with 5 columns: Number of Persons, Full Name, Relationship, Age, Student Status. Rows for 1-6 persons with checkboxes for Full-time, Part-time, N/A.

Does anyone live with you now who is not listed above? Yes No. Does anyone plan to live with you in the future who is not listed above? Yes No. If you answered "Yes" to any question, please explain: \_\_\_\_\_

Are any of the household members listed above: Foster children? Yes No Live-in attendants? Yes No

Were any of the names listed above students in the year this application was completed? Yes No. Do any of them plan to be students in the year this application is completed? Yes No. If you answered "Yes" to either question, please explain: \_\_\_\_\_

4. Income. List all income of all adults and persons in your household, including those under 18 (except for income earned from employment by persons under the age of 18 who are dependents of another household member).

Table for Gross Monthly Income Source. Columns: Applicant, Co-Applicant, Other Household Members, Total. Rows include Salary, Overtime Pay, Commissions and Fees, Tips and Bonuses, Interest and/or Dividends, Net Income from Business, Net Rental Income, Social Security, Pensions, Retirement Funds, etc., Support from Parents or Relatives, Unemployment Benefits, Workers' Compensation, etc., Alimony, Sources of Child Support, AFDC/TANF, Student Financial Assistance, Other.

5. Assets. List all assets of all adults and persons in your household, including those under the age of 18.

Table for Listing of All Assets. Columns: Listing of All Assets, Cash Value, Annual Interest, Dividends or Rent from Assets, Name of Financial Institution or Description of Asset, Account Number. Rows include Checking Account(s), Savings Account(s), Credit Union Account(s), Stocks, Bonds or Mutual Funds, Real Estate or Home, IRA/Keough Account, Retirement Fund (401(k), 457, 403(b), etc.), Pension Fund, Trust Fund, Mortgage Note Held, Whole Life Insurance, Cash Value, Other.

6. Rental Assistance. Do you receive any type of federal, state, or local government rental assistance? Yes No. If yes, please explain: \_\_\_\_\_

7. Asset Verification. Have you disposed of any assets for less than fair market value in the last two years preceding the date of this application? Yes No.

8. Certification. By signing this Supplemental Rental Application, you as the applicant are certifying that all the above information is true and correct. You are consenting to disclosure of income and financial information from your employer(s) and any financial institutions where your assets are kept.

9. Recertification. If this form is being used for recertification and you have changed employment during the past year, you must complete the "Your Work" section of the TAA Rental Application.

Applicant

Date of Signing Application

Co-Applicant

Date of Signing Application



**TENANT RELEASE AND CONSENT**

I/We \_\_\_\_\_, the undersigned hereby authorize all persons or companies in the categories listed below to release information regarding employment, income and/or assets for purposes of verifying information on my/our apartment rental application. I/we authorize release of information without liability to the owner/manager of the apartment community listed below, and/or the Texas Department of Housing and Community Affairs.

**INFORMATION COVERED**

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquires that may be requested include, but are not limited to: personal identity, student status, employment, income, assets, medical or child care allowances. I/We understand that this authorization cannot be used to obtain information about me/us that is not pertinent to my eligibility for and continued participation as a Qualified Tenant.

**GROUPS OR INDIVIDUALS THAT MAY BE ASKED**

The groups or individuals that may be asked to release information include, but are not limited to:

- |  |  |                                  |
|--|--|----------------------------------|
| Past and Present Employers             | Welfare Agencies                                       | Veterans Administrations         |
| Support and Alimony Providers          | State Unemployment Agencies                            | Retirement Systems               |
| Educational Institutions               | Social Security Administration                         | Medical and Child Care Providers |
| Banks and other Financial Institutions | Previous Landlords (including Public Housing Agencies) |                                  |

**CONDITIONS**

I/We agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file and **will stay in effect for a year and one month** from the date signed. I/We understand I/We have the right to review this file and correct any information that is incorrect.

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**SIGNATURES**

\_\_\_\_\_  
Applicant/Resident (Print Name) Date

\_\_\_\_\_  
Co/Applicant/Resident (Print Name) Date

\_\_\_\_\_  
Adult Member (Print Name) Date

\_\_\_\_\_  
Adult Member (Print Name) Date

\_\_\_\_\_  
Apartment Name Contact Phone

**NOTE: THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF A TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.**

## Landings of Carrier Parkway UNDER \$5,000 ASSET CERTIFICATION

For households whose combined net assets do not exceed \$5,000.  
Complete only one form per household; include assets of children.

Household Name: \_\_\_\_\_ Unit No. \_\_\_\_\_

Development Name: \_\_\_\_\_ City: \_\_\_\_\_

**Complete all that apply for 1 through 4:**

1. My/our assets include:

(A) Cash Value*	(B) Int. Rate	(A*B) Annual Income	Source	(A) Cash Value*	(B) Int. Rate	(A*B) Annual Income	Source
\$ _____	_____	\$ _____	Savings Account	\$ _____	_____	\$ _____	Checking Account
\$ _____	_____	\$ _____	Cash on Hand	\$ _____	_____	\$ _____	Safety Deposit Box
\$ _____	_____	\$ _____	Certificates of Deposit	\$ _____	_____	\$ _____	Money Market funds
\$ _____	_____	\$ _____	Stocks	\$ _____	_____	\$ _____	Bonds
\$ _____	_____	\$ _____	IRA Accounts	\$ _____	_____	\$ _____	401K Accounts
\$ _____	_____	\$ _____	Keogh Accounts	\$ _____	_____	\$ _____	Trust Funds
\$ _____	_____	\$ _____	Equity in real estate	\$ _____	_____	\$ _____	Land Contracts
\$ _____	_____	\$ _____	Lump Sum Receipts	\$ _____	_____	\$ _____	Capital investments
\$ _____	_____	\$ _____	Life Insurance Policies (excluding Term)	\$ _____	_____	\$ _____	
\$ _____	_____	\$ _____	Other Retirement/Pension Funds not named above:	_____			
\$ _____	_____	\$ _____	Personal property held as an investment**:	_____			
\$ _____	_____	\$ _____	Other (list):	_____			

PLEASE NOTE: Certain funds (e.g. Retirement, Pension, Trust) may or may not be (fully) accessible to you. Include only those amounts which are.

\*Cash value is defined as market value minus the cost of converting the asset to cash, such as broker's fees, settlement costs, outstanding loans, early withdrawal penalties etc.

\*\*Personal property held as an investment may include, but is not limited to, gem or coin collections, art, antique cars, etc. Do not include necessary personal property such as, but not necessarily limited to, household furniture, daily-use autos, clothing, assets of an active business, or special equipment for use by the disabled.

2. Within the past two (2) years, I/we have sold or given away assets (including cash, real estate, etc.) for more than \$1,000 below their fair market value (FMV). Those amounts\* are included above and are equal to a total of: \$ \_\_\_\_\_ (\* the difference between FMV and the amount received, for each asset on which this occurred).

3. I/we have not sold or given away assets (including cash, real estate, etc.) for less than fair market value during the past two (2) years.

4. I/we do not have any assets at this time.

**The net family assets (as defined in 24 CFR 813.102) above do not exceed \$5,000 and the annual income from the net family assets is \_\_\_\_\_ . This amount is included in total gross annual income.**

Under penalty of perjury, I/we certify that the information presented in this certification is true to the best of my/our knowledge. The undersigned further understand(s) that providing false representation herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

\_\_\_\_\_  
Applicant/Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant/Tenant

\_\_\_\_\_  
Date