



THE
Grand Reserve
AT MADISON

THE WAY LIFE WAS MEANT TO BE...

Thank you for your interest in The Grand Reserve at Madison.
We love our residents and would love for you to call
The Grand Reserve at Madison your new home.

- ❖ **Please fill out and sign all areas.**

- ❖ **Equal Housing:** Title VIII of the Civil Rights Act of 1968 (Fair Housing Act) prohibits discrimination in the sale or rental of property based on race, color, national origin, religion, sex, familial status and disability.

- ❖ **General Applicant Requirement:** All applicants must be at least 18 years of age.

- ❖ **Identification:** All applicants must present a current photo ID issued by a state or government authority. A copy of all applicants' photo IDs will be made and kept on file.

- ❖ **Income Requirements:** For income verification, please bring 3 current paystubs. Applicant must have a monthly gross income of at least 3 times the amount of the rental rate.

- ❖ **Credit History:** The Grand Reserve at Madison may verify credit history. An unsatisfactory credit report can disqualify an applicant from renting an apartment. In some cases, an additional deposit may be required for occupancy.

If you have any questions, feel free to call us at 256-325-4747.

Hope to see you soon!



244 Kyser Boulevard • Madison, Alabama 35758 • Phone: 256-325-4747 • Fax: 256-325-4748

Application for Residency

Type of apartment desired: _____ How did you hear about us? _____
Rental Amount: \$ _____ Referred By: _____
Move in Date: _____ E-mail: _____
Apartment No. : _____ Length of Lease : _____

1 Applicant's Full Name: _____ Soc. Sec. #: _____
Phone: (_____) _____ Date of Birth: _____ DL #: _____ State: _____
Name of Bank: _____ Branch: _____
Bank Phone: (_____) _____ Checking: Savings: Loan:

2 Co-Applicant: _____ Soc. Sec. #: _____
Phone: (_____) _____ Date of Birth: _____ DL #: _____ State: _____

3 No. to Occupy Apartment: _____ Other Occupant(s) Name: _____ Age: _____
Age: _____
Age: _____
Age: _____
Age: _____

It is the policy of this community that:
No more than two (2) persons occupy a one bedroom
No more than four (4) persons occupy a two bedroom
No more than six (6) persons occupy a three bedroom.

4 Present Address: _____ Apt. #: _____
City: _____ State: _____ Zip: _____ How Long: _____
Rent Amount: _____ Own Rent Reason for Moving: _____
Landlord's Name or Mortgage Holder: _____
Address: _____ Phone: (_____) _____
City: _____ State: _____ Zip: _____

5 Former Address: _____ Apt. #: _____
City: _____ State: _____ Zip: _____ How Long: _____
Rent Amount: _____ Own Rent Reason for Moving: _____
Former Landlord's Name or Mortgage Holder: _____
Address: _____ Phone: (_____) _____
City: _____ State: _____ Zip: _____

6 Applicant's Employer: _____ Supervisor: _____
Address: _____ Phone: (_____) _____
City: _____ State: _____ Zip: _____
Position: _____ Gross Salary: \$ _____ Per: _____ Start Date: _____

7 Co-Applicant's Employer: _____ Supervisor: _____
Address: _____ Phone: (_____) _____
City: _____ State: _____ Zip: _____
Position: _____ Gross Salary: \$ _____ Per: _____ Start Date: _____

8 Autos - How many autos will be kept on the premises? _____

Make: _____	Year: _____	Color: _____	Tag #: _____
Make: _____	Year: _____	Color: _____	Tag #: _____
Make: _____	Year: _____	Color: _____	Tag #: _____
Make: _____	Year: _____	Color: _____	Tag #: _____

9 Pets - Do you have a pet? Yes No

**NO PETS ALLOWED IN CORPORATE UNITS.
 WEIGHT LIMIT ON PETS IS 50 POUNDS
 \$350.00 PET FEE PER PET AND IT IS NON-REFUNDABLE (LIMIT 2 PETS PER UNIT)**

Type _____
 Breed _____ Weight at maturity: _____ Housebroken? _____

10 Emergency - Who should be notified in case of emergency? Nearest relative (other than spouse)

Name: _____ Phone: (_____) _____
 Address: _____
 Business: _____ Phone: (_____) _____

11 Application Fee - There is a \$ 50.00 Application Processing Fee. **(NON-REFUNDABLE)**

12 Deposit - Amount of deposit: \$ 200.00 Subject to change based on credit score

13 ADMINISTRATIVE FEE - \$ 100.00 **(NON-REFUNDABLE)**

In the event this application is approved and applicant fails or refuses to enter into lease, the deposit & administrative fee shall be Retained by Landlord as liquidated damages. In the event application is disapproved or for any other reason Landlord is responsible for not consummating the lease agreement, this deposit will be returned to applicant. Any misrepresentation may disqualify the applicant. Applicant does hereby verify that all statements made are true and correct and does authorize a credit check and verification of the above application.

I AUTHORIZE YOU TO CONTACT PREVIOUS LANDLORD(S), CREDIT AND PERSONAL REFERENCES THAT I HAVE GIVEN IN THIS APPLICATION.

I ALSO AUTHORIZE MANAGEMENT TO OBTAIN MY CONSUMER CREDIT .

The above information, to the best of my knowledge, is true and correct.

Signature of Applicant: _____ **Date:** _____

Signature of Co-Applicant: _____ **Date:** _____

THE GRAND RESERVE AT MADISON

244 KYSER BLVD.
256-325-4747
256-325-4748-FAX
grrsmadison@knology.net

RENTAL VERIFICATION FORM

Date: _____

Community Name: _____

Name of Resident: _____

Resident Address: _____

I hereby authorize The Grand Reserve at Madison's permission to obtain rental history on my behalf.
Please fax back to 256-325-4748.

Resident Signature

Date

RESIDENT HISTORY:

Move in Date: _____

Has Notice Been Given? _____

Rental Amount: _____

Number of Late Payments: _____

Number of NSF Charges: _____

Any Noise Complaints? _____

Any Pets? _____

Any Lease Violations? _____

Would you Lease to Applicant Again? _____

Preparer's Name (Please Print)

Date

Preparer's Signature

Title

Sent by

Date