



Advantage Pointe Properties, LLC
9648 Sun Dancer Drive, NW
Albuquerque, NM 87114



Application for Tenancy of Residential Property

Part I – Broker Basic Duties

Every licensed New Mexico real estate Broker is obligated to disclose Broker Duties. Please acknowledge receipt of this information by initially or signing, as appropriate, the Broker Duties pages of this section of the Property Management Agreement.

Disclosure: The following brokerage relationships are available in the State of New Mexico:

- (1) transaction broker;
- (2) exclusive agency; and
- (3) dual agency.

Prior to the time an Associate Broker or Qualifying Broker generates or presents any written document that has the potential to become an express written agreement, the Broker shall disclose in writing to a prospective buyer, seller, landlord or tenant, the following list of Broker Duties that are owed to all Customers and Clients by all Brokers regardless of the brokerage relationship:

- 1) Honesty and reasonable care, as set forth in the provisions of this section;
- 2) Compliance with local, state and federal fair housing and anti-discrimination laws, the New Mexico Real Estate License Law, the New Mexico Real Estate Commission Rules and Regulations and other local, state and federal laws and regulations;
- 3) Performance of any and all oral or written agreements made with the Broker's Customer or Client;
- 4) Assistance to the Broker's Customer or Client in the completion of the Transaction, unless otherwise agreed to in writing by the Customer or Client, including:
 - (a) presentation of all offers and counter-offers in a timely manner; and
 - (b) assistance in complying with the terms and conditions of the contract and with the closing of the Transaction.

If a Broker in a Transaction is not providing the service, advice or assistance described in paragraphs 4(a) and 4(b), the Customer or Client must agree in writing that the Broker is not expected to provide such service, advice or assistance, and the Broker shall disclose such agreement in writing to the other Brokers involved in the Transaction;

- 5) Acknowledgment by the Broker that there may be matters related to the transaction that are outside of the Broker's knowledge or expertise and that the Broker will suggest that the Customer or Client seek expert advice on these matters;
- 6) Prompt accounting of all monies or property received by the Broker;
- 7) Prior to the time an Associate Broker or Qualifying Broker generates or presents any written document that has the potential to become an express written agreement, written disclosure of:
 - (a) any written Brokerage Relationship the Broker has with any other Parties to the Transaction;
 - (b) any material interest or relationship of a business, personal or family nature that the Broker has in the Transaction; and
 - (c) other Broker Relationship options available in the State of New Mexico;

Applicant Initials: _____



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8) Disclosure of any adverse material facts actually known by the Broker about the property or the Transaction, or about the financial ability of the Parties to the Transaction to complete the Transaction. Adverse material facts do not include data from a sex offender registry or the existence of group homes;

9) Maintenance of any confidential information learned in the course of any prior Agency relationship, unless the disclosure is with the former Client's consent or is required by law;

10) Unless otherwise authorized in writing, a Broker shall not disclose to their Customer or Client during the Transaction that (a) their Seller Customer or Client or their Buyer Customer or Client has previously indicated that they will accept a sales price less than the asking or listed price of the property; (b) their Buyer Customer or Client has previously indicated that they will pay a sales price greater than the sales price submitted in a written offer; (c) the motivation of their Customer or Client for selling or buying property; (d) their Seller Customer or Client or their Buyer Customer or Client will agree to financing terms other than those offered; or (e) any other information requested in writing by their Customer or Client to remain confidential, unless disclosure is required by law.

Part II – Broker Basic Duties

1) Broker () does (X) does not have a material interest or relationship of a business, personal or family nature in the Transaction, including compensation from more than one party:

If the Brokerage or the Qualifying Broker has a material interest or relationship of a business, personal or family nature in the Transaction, that interest or relationship must be disclosed separately, also.

Applicant's Signature _____ Date _____ Time _____

Applicant's Signature _____ Date _____ Time _____

Applicant's Name (Please Print) _____

Applicant's (Please Print) _____

Applicant is is not a New Mexico real estate Broker.
Broker.

Applicant is is not a New Mexico real estate

Broker

Advantage Pointe Properties, LLC
9648 Sun Dancer Drive NW
Albuquerque, New Mexico 87114
Richard L. Small, Qualifying Broker

Broker Name (Please Print) _____

Broker (X) is () is not a Realtor®

Broker Signature _____ Date _____ Time _____

Advantage Pointe Properties, LLC
9648 Sun Dancer Drive, NW
Albuquerque, NM 87114
(505) 205-1581



**Advantage Pointe Properties, LLC
9648 Sun Dancer Drive, NW
Albuquerque, NM 87114**



Application for Tenancy of Residential Property

Application for Tenancy

Address of Property being applied for

City of Property being Applied for

Monthly Rent Amount

Desired Move-In Date

Desired Term of Lease/Rental Agreement (in months)

Amount of Application Fee Submitted

Amount of Earnest Money Submitted, if any

- 1) All persons 18 years of age or older who will be residing in the above property must submit an application;
- 2) All applicants must submit a non-refundable application fee of \$45.00;
- 3) For reasons of safety and sanitation, the total number of residents may not exceed two (2) per bedroom;
- 4) All applications are processed on a first come-first serve basis (note next paragraph);
- 5) Applications submitted with fully refundable earnest money in an amount of no less than one-half of one month's rent (applied to security deposit, if approved) will take priority over those applications submitted without earnest money;
- 6) Pets are accepted only on owner approval and with a minimum pet deposit of \$250 per pet. In no case, will exotic pets or those known to be of unpredictable temperament (examples: Reptiles, Staffordshire Terriers, German Shepherds, Doberman Pinchers, Huskies, etc. whether purebred or mixed) be allowed on the property)
PLEASE NOTE THAT A VIOLATION OF ADVANTAGE POINTE PROPERTIES, LLC' PET POLICY MAY RESULT IN THE IMMEDIATE TERMINATION OF ANY LEASE/RENTAL AGREEMENT RESULTING FROM THIS APPLICATION;
- 7) The combined gross (before tax) monthly household income must equal or exceed three (3) times the monthly rent.

Applicant's Signature

Date

Applicant's Signature

Date

Applicant Name (Please Print)

Applicant Name (Please Print)

The Following Area is For Office Use Only

Application received by: Mail Fax E-mail By Hand

Date and Time Received

By Whom Received



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Application for Tenancy of Residential Property

Advantage Pointe Properties, LLC
9648 Sun Dancer Drive, NW
Albuquerque, NM 87114
(505) 205-1581 • (888) 875-8717
(fax) service@box133.com

Application for Tenancy

Instructions

- 1) Please use all available fields when submitting your application, i.e., if there are two applicants, enter all information on a single application and so on. If three or more applicants, use additional applications, as necessary;
- 2) If more than one applicant, please indicate the "Primary Applicant" by checking the appropriate box. The primary applicant will serve as your property manager's primary point of contact;
- 3) Submit copies of each employed applicant's last three paystubs or a letter from the applicant's employer stating date of hire, rate of pay and frequency of pay or a copy of the page of your most recent IRS tax filing showing gross income;
- 4) As the information provided on the application will be used to determine your eligibility for tenancy, please be certain to provide as much information as possible. Illegible or missing information may delay the application process or be cause for declining your application.

Applicant No. _____ of _____ Information

Applicant Name (Please Print)

Current Address	City	State	Zip Code
_____ / _____ / _____	_____ - _____ - _____	Driver's License Number	State _____
Date of Birth	Social Security Number		

This applicant will be the Primary Applicant/Tenant. The Primary Applicant/Tenant will serve as the primary point of contact for Advantage Pointe Properties, LLC as regards all communications between the applicant(s)/tenant(s) and Advantage Pointe Properties, LLC. Communication to or from the Primary Applicant/Tenant shall be deemed communication to or from all Applicant(s)/Tenant(s) of the property.

This applicant is active military and may be subject to involuntary redeployment.

If primary applicant, applicant agrees to accept all communications, as applicable and appropriate, via electronic means.

Primary Phone Number (including Area Code) Ext.

Cell/Mobile Home Work
Please check one of the above.

Alternate Phone Number (including Area Code) Ext.

Cell/Mobile Home Work
Please check one of the above.

Alternate Phone Number (including Area Code) Ext.

Cell/Mobile Home Work
Please check one of the above.

E-mail Address of Applicant



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Application for Tenancy of Residential Property

Residence History

At current address from _____ / _____ / _____ to _____ / _____ / _____

Name of Current Landlord or Management Company _____ Monthly Rent or Mortgage _____

Voice and Fax Phone Numbers of Current Landlord or Management Company _____

Previous Address, if at current address for less than two years _____ City _____ State _____ Zip Code _____

At previous address from _____ / _____ / _____ to _____ / _____ / _____

Name of Previous Landlord or Management Company _____ Monthly Rent or Mortgage _____

Voice and Fax Phone Numbers of Previous Landlord or Management Company _____

Employment & Income History

Employed By _____

Employed from _____ / _____ / _____ to _____ / _____ / _____

Name of Supervisor _____ Supervisor Phone Number _____

\$ _____
Gross (before tax) Monthly Income _____ \$ _____
Other Income (Provide Supporting Documentation) _____

Previously Employed by, if at current employer for less than two years _____

Employed from _____ / _____ / _____ to _____ / _____ / _____

Name of Supervisor _____ Supervisor Phone Number _____

\$ _____
Gross (before tax) Monthly Income _____

Background Information (check if True; do not check if False)

I have previously filed for bankruptcy.
Year Filed: _____ Date Discharged: _____ / _____ / _____

I have been convicted of a sexual offense requiring that I register with and provide current information to the local law enforcement authority.

I have been convicted of manufacturing and/or distributing an illegal or



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Application for Tenancy of Residential Property

controlled substance.

I am currently undergoing treatment for drug addiction.
Facility or Treatment Provider: _____
Facility or Treatment Provider Phone Number: _____

If not a legal resident of the United States of America, I have legal authority to reside in the United States of America. If this box is checked, you must provide appropriate documentation.

I have previously been or am being evicted from a rental property.

I have previously broken or am breaking a lease or rental agreement.

I currently owe my current or a previous landlord for past due rent or unpaid charges resulting from my tenancy.

Applicant No. _____ of _____ Information

Name

Current Address _____ City _____ State _____ Zip Code _____

Date of Birth _____ / _____ / _____ Social Security Number _____ Driver's License Number _____ State _____

This applicant will be the Primary Applicant/Tenant. The Primary Applicant/Tenant will serve as the primary contact for Advantage Pointe Properties, LLC as regards all communications between the applicant(s)/tenant(s) and Advantage Pointe Properties, LLC. Communication to or from the Primary Applicant/Tenant shall be deemed communication to or from all Applicant(s)/Tenant(s) of the property.

This applicant is active military and may be subject to redeployment.

If primary applicant, applicant agrees to accept all communications, as applicable and appropriate, via electronic means.

Primary Phone Number (including Area Code) _____ Ext. _____

Cell/Mobile Home Work

Please check one of the above.

Alternate Phone Number (including Area Code) _____ Ext. _____

Cell/Mobile Home Work

Please check one of the above.

Alternate Phone Number (including Area Code) _____ Ext. _____

Cell/Mobile Home Work

Please check one of the above.

Applicant's E-mail Address

Residence History



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Application for Tenancy of Residential Property

Same as Applicant No. _____

At current address from _____ / _____ / _____ to _____ / _____ / _____

Name of Current Landlord or Management Company _____ Monthly Rent or Mortgage _____

Voice and Fax Phone Numbers of Current Landlord or Management Company _____

Previous Address, if at current address for less than two years _____ City _____ State _____ Zip Code _____

At previous address from _____ / _____ / _____ to _____ / _____ / _____

Name of Previous Landlord or Management Company _____ Monthly Rent or Mortgage _____

Voice and Fax Phone Numbers of Previous Landlord or Management Company _____

Employment & Income History

Employed By _____

Employed from _____ / _____ / _____ to _____ / _____ / _____

Name of Supervisor _____ Supervisor Phone Number _____

\$ _____
Gross (before tax) Monthly Income _____ \$ _____
Other Income (Provide Supporting Documentation) _____

Previously Employed by, if at current employer for less than two years _____

Employed from _____ / _____ / _____ to _____ / _____ / _____

Name of Supervisor _____ Supervisor Phone Number _____

\$ _____
Gross (before tax) Monthly Income _____

Background Information
(check if True; do not check if False)

- I have previously filed for bankruptcy.
Year Filed: _____ Date Discharged: _____ / _____ / _____
- I have been convicted of a sexual offense requiring that I register with and provide current information to the local law enforcement authority.
- I have been convicted of manufacturing and/or distributing an illegal or controlled substance.



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I am currently undergoing treatment for drug addiction.
Facility or Treatment Provider: _____
Facility or Treatment Provider Phone Number: _____

If not a legal resident of the United States of America, I have legal authority to reside in the United States of America. If box is checked, you must provide appropriate documentation.

I have previously been evicted or am being evicted from a rental property.

I have previously broken or am breaking a lease or rental agreement.

I currently owe my current or a previous landlord for past due rent or unpaid charges resulting from my tenancy.

General Information

Applicant(s) request approval for the following pets:

Dog Cat Fish Bird Other – Describe: _____

If any pets will be residing on the property, applicant must complete pet information found on last page of this application.

Names of Occupants (Excluding Co-Applicant(s))
Over Age 18: (Please Print Name, Relationship and Age)

Names of Occupants Under Age 18:
(Please Print Name, Relationship and Age)

Vehicles to be Parked at Property:

Make & Model	Year	Color	State	Tag Number

Personal References



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Reference #1 Name _____ Relationship to Applicant _____

Reference #1 Address _____ City _____ State _____ Zip Code _____

Reference #1 Phone Number _____ Reference #1 E-mail Address _____

Reference #2 Name _____ Relationship to Applicant _____

Reference #2 Address _____ City _____ State _____ Zip Code _____

Reference #2 Phone Number _____ Reference #2 E-mail Address _____

Reference #3 Name _____ Relationship to Applicant _____

Reference #3 Address _____ City _____ State _____ Zip Code _____

Reference #3 Phone Number _____ Reference #3 E-mail Address _____

Emergency Contact (must be other than a co-applicant)

Contact Name _____ Relationship to Applicant _____

Contact Address _____ City _____ State _____ Zip Code _____

Contact Phone Number _____ Contact E-mail Address _____



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Statement of Fact

I/We, by affixing my/our signature(s), below, attest that the foregoing information is true and factual to the best of my/our knowledge. Furthermore, I/we acknowledge and agree that any untruthful or misleading information provided by me/us will be cause for declining the application for tenancy of the property or the immediate termination of any lease/rental agreement resulting from approval of this application for tenancy by Advantage Pointe Properties, LLC that was based on such untruthful or misleading information provided by the applicant(s) or agent(s) of said applicant(s).

Date _____

Applicant's Signature

Date _____

Applicant Name (Please Print)

Applicant Name (Please Print)



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Authorization for Release of Information

I/We, by affixing my/our signature(s), below, grant permission for the release of information to Advantage Pointe Properties, LLC as may be requested by Advantage Pointe Properties, LLC and as may regard my/our credit history, criminal background, rental history and/or employment history and income.

I/We understand and agree that such information may be sought by Advantage Pointe Properties, LLC from credit bureaus or other consumer reporting agencies, public records, past and present employers and landlords and from personal references.

Furthermore, I/we understand that all information, including this application, obtained by Advantage Pointe Properties, LLC shall be held in strictest confidence by and remain the property of Advantage Pointe Properties, LLC.

Date

Applicant's Signature

Date

Applicant Name (Please Print)

Applicant Name (Please Print)



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The Following Pet(s) are Owned by Applicant(s)

Pet (as applicable):	Pet #1	Pet #2	Pet #3	Pet #4
Type				
Breed				
Age				
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female			
Weight				
Assistive Animal?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Tank Size (gallons)				
Color				
Name				
Rabies Tag: Number				
Issue Date				
Issuing Authority				
Registration Tag No.				
Issue Date				
Issuing Authority				
Spayed or Neutered?	<input type="checkbox"/> Yes <input type="checkbox"/> No			

Applicant Initials _____