

**APPLICATION FOR LEASING PERMIT AT
THE REATA AT RIVER OAKS, A CONDOMINIUM
3231 ALLEN PARKWAY HOUSTON, TEXAS 77019**

UNIT NUMBER: _____ NAME OF OWNER: _____

OWNERS MAILING ADDRESS: _____

OWNERS CONTACT INFORMATION

HOME PHONE: _____ OFFICE PHONE: _____

CELL PHONE: _____ FACSIMILE: _____

E-MAIL: _____

Is unit currently being leased? _____ If so, please provide the following information.

NAME OF TENANT: _____

HOME PHONE: _____ OFFICE PHONE: _____

CELL PHONE: _____ FACSIMILE: _____

E-MAIL: _____

DATE OF LEASE: _____ **LENGTH OF LEASE:** _____

TENANT ACKNOWLEDGEMENT

I agree to abide by the terms and condition of the Declaration, By-laws and Rules and Regulations of Reata at River Oaks. Failure to comply with the terms of such instruments shall be default under the lease and the owner and/or tenant are subject to penalties. Subject to the penalties of perjury, I swear that the initial term of my lease with _____ (Owner's Name) is not less than six (6) months, which I understand is strictly prohibited by the Declaration, By-Laws and Rules and Regulations of Reata at River Oaks.

TENANT'S SIGNATURE: _____ **DATE:** _____

PRINTED NAME: _____

BEFORE ME, the undersigned authority, on this day personally appeared _____, to be the person whose name is subscribed to the foregoing instrument, and acknowledge to me that he/she executed the same for the purposes therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the ____ day of _____. 20____.

NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

**Please attach a copy of the lease agreement for the unit to this application.*

**All leases must be for an initial term of not less than (6) six months.*

**Owners are required to complete a background check on all prospective tenants.*

OWNER'S SIGNATURE: _____ **DATE:** _____

PRINTED NAME: _____

MANAGEMENT COMPANY INFORMATION

If you are using a management company, please provide copy of power of attorney to us authorizing Management Company to act on your behalf and stating that they are your agent to accept any and all notices regarding the leasing of your unit, unless you desire the notices be provided directly to you. A Management company will not be acknowledged to be acting on your behalf until written notice is received directly from you appointing them as your agent.

NAME OF MANAGEMENT COMPANY (IF APPLICABLE): _____

OFFICE PHONE: _____

CELL PHONE: _____

FACSIMILE: _____

E-MAIL: _____

Is unit currently vacant? _____ If, so is it currently being marked as a rental unit? _____

If being marketed as a rental unit, please attach a copy of the proposed lease agreement for the unit.

ADDITIONAL INFORMATION (IF ANY): _____

Below Reserved For Board Use Only

DATE APPLICATION RECEIVED: _____

APPROVED: _____ PERMIT VALID UNTIL: _____

DENIED: _____ REASON FOR DENIAL: _____

OTHER: _____

AUTHORIZED AGENT FOR BOARD: _____