

GREYSTAR MANAGEMENT SERVICES

RESIDENT VERIFICATION REQUEST

Date: _____

Phone: _____ Fax: _____

Management Company/Apartment Community: _____

Attention: _____

To Whom It May Concern:

With this letter, I grant you permission to disclose the information requested below to Vistas at Seven Bar Ranch Apartment Homes. I would appreciate the return of this document as soon as possible in order to complete the verification process on my new apartment home. Thank you for your cooperation.

Resident Signature

Date

Resident Name: _____

Address: _____

Move In Date: _____ Move Out Date: _____

Lease Expires: _____ Eviction: Yes _____ No _____

Lease Fulfilled: Yes _____ No _____

Proper Noticed Given: Yes _____ No _____

Any Pets Yes _____ No _____

If "Yes" What Kind: _____

Monthly Rental Amount: \$ _____ Paid On Time: Yes _____ No _____

If "No" How Many Times Late: _____

Late Fees Paid As Agreed: Yes _____ No _____ Any NSF'S: Yes _____ No _____

Authorized Signature: _____ Date: _____

Title: _____

Please Fax Completed Form To: _____ (505) 792-5005

If You Have Questions, Please Call: _____ (505) 792-7227