

RENTAL ARREARS AGEEMENT

Address: _____

I/we _______ of the above stated address, agree that I/we have breached the AHS Residential Tenancy Agreement Article 6(a) (any other applicable Article) by:

Not paying rent for the **month of** ______ on time or in full. I/we state that I/we have read the Residential Tenancy Agreement and fully understand its meaning.

In consideration of AHS withholding a "10-Day Notice to End Tenancy", **I/we agree that the total rental arrears due and payable is** \$______.

I/we further agree that I/we will pay the full amount on or before ____/___/____/_____/ (This date cannot exceed two weeks past due date) M M D D Y Y Y Y

Reasons for late rent: _____

Furthermore, I/we understand that failure to pay rent on time or in full in the future violates the AHS Residential Tenancy Agreement and constitutes a Breath of Contract and therefore is sufficient grounds to eviction from the said residence.

Finally, AHS reserves the right to serve a "Notice of End Tenancy" if this agreement is broken or not held to.

Tenant Signature(s):	Date:
AHS Authoritative:	Date:
Position:	