

THE KAMSON CORPORATION

COMMUNITIES FOR BETTER LIVING

Washington Way Apartments

2049 Barnsboro Road, Blackwood, New Jersey, 08012

Phone Number: (856) 227-5211

Fax: (856) 227-9445

Application For Lease

Must be completed in its entirety to be processed.

All verification services to be provided to WASHINGTON WAY APARTMENTS under terms of this agreement entered into with a licensed contracted consumer credit agency and the accuracy thereof shall be conditioned by the requirement that applicant and customer provide the following information as to the individual applicants below. Where inapplicable information is requested, mark N/A. Applicant and customer shall sign and date this document in appropriate space below prior to its submission to a licensed contracted consumer credit agency. Multiple applicants, including spouse, must complete and sign.

The undersigned hereby agrees to execute a lease, in the event of the approval if the rental application for apartment _____ for the term of _____ commencing on (approximately) _____ at a monthly rate of \$ _____ payable monthly in advance on the first day of each month.

In the event the rental application is approved, the owner or agent may apply the reservation fee of \$100.00 towards rent or to become due unless the undersigned cancels the application, along with the Certificate of Occupancy Fee where applicable, to reserve an apartment. **If the application is approved and was not cancelled the undersigned chooses not to enter into the lease, the reservation fee could be forfeited as liquidated damages incurred by the owner as a result of not having been able to rent the apartment to another party during this time.**

The undersigned has read the foregoing and certifies that the facts set forth in the accompanying rental application are true and correct and that the rental application submitted for the purpose of inducing approval of the application in the undersigned's behalf. In the event that this application is not approved, the undersigned shall be entitled to have the return of the reservation fee made and no more, and all rights of the undersigned shall thereupon terminate and end absolutely. **The \$30.00 fee per applicant for investigation of the undersigned's application is under no circumstances refundable.**

APPLICANT NAME _____ **Date of birth** _____ **SS#** _____
First Middle Last

CO-APPLICANT NAME _____ **Date of birth** _____ **SS#** _____
First Middle Last

App. Drivers Lic. No. _____ State _____ Co-App. Drivers Lic No. _____ State _____

Other Occupants: _____
Name SS# Age Relationship

_____ Name SS# Age Relationship

APPLICANT Home Phone# _____ Cell Phone# _____

Present Address _____
Street Apt# City State Zip

From: _____

Dates: To: _____
Present Landlord/Resident Mgr. Apt. Name/If Home-Mortgage Co. \$ Loan#

Monthly Payment _____ Reason for moving _____

Have you ever been evicted from any leased premises? _____ If yes, explain _____

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