

CORPORATE RENTAL APPLICATION
LuxuryAptsWNY
 Managed by: S. B. ASHLEY MANAGEMENT COOPERATION

This is an application for lease. A specific apartment will not be reserved or held until completed application and deposits are received by the Rental Office.

APPLICANT-Legal name of company: _____
 Mailing address: _____
 Tax ID# _____ Telephone # _____
 Contact person (and extension if applicable) _____

OCCUPANTS NAMES:
 #1 _____ at least 18 years of age? yes no
 #2 _____ at least 18 years of age? yes no

REFERENCES: Please supply us with at least 3 credit references

Company	Address	phone number	Account #
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

All occupants are expected to abide by the lease terms and property policies. Please have all occupants/employees check into the leasing office before moving in to obtain a copy of terms and policies.

I hereby certify that I am authorized by the above company to enter the company into a lease agreement. All information contained herein is true and correct in every particular. I understand that while processing this application, a credit report will be obtained and references contacted whereby information may be obtained to approve or disapprove this application.

I, as an agent for the applicant, have deposited with landlord \$ _____ I understand that \$ 35.00 of this amount is a non-refundable processing fee and the balance is an application deposit and is not to be considered a security deposit. If this application is rejected the application deposit will be refunded in full by the owner. I understand that in the event we choose not to enter into a lease, this application deposit is forfeited and will be considered liquidated damages, whether or not the unit(s) is (are) subsequently rented. This is an arms length contractual agreement and we acknowledge that it is not subject to applicable real property laws. This application shall be attached to and shall constitute a part of the lease hereby applied for.

Date _____ Signature _____

Print name & title _____

Copy of Drivers License Received by Leasing Agent (acknowledge receipt) _____

PERSONAL GUARANTEE Required for all small (ie: non-public, etc...) companys
 The undersigned guarantees payment of all amounts owed to Landlord by the above Business now or in the future. In the event the above Business fails to pay any amounts owed under the lease agreement, the undersigned will immediately pay the full amount owed plus attorney's fees for collection, and/or eviction.

Print name _____
 Signature _____
 Personally and Not as a Corporation officer or in a Representative Capacity
 Address: _____
 Social Security Number: _____

For all guarantors you must include a copy of your driver's license with this application