

SHERBROOK APARTMENTS
OFFICE Q-5
CORTLAND NY 13045
756-6145
(FAX 753-9961)

APARTMENT APPLICATION-ONE PERSON PER APPLICATION

Your credit history & references will be checked.

We need at least five years of history!

Date Wanted: _____
Name: _____ **Spouse** _____
Social Security Number: (____ - ____ - ____) **Fax:** _____
Present phone #: (____) _____ - _____
e-mail address: _____ **Voice Plus:** _____
Present address:# _____ **Street** _____ **CITY** _____
STATE _____ **ZIP** _____
Present address: from(dates) _____ **to** _____
Present landlord: _____
Relationship to you: _____
Phone # of Landlord:(____) _____ - _____
Landlord's address:# _____ *STREET* _____ *CITY* _____
STATE _____ *ZIP* _____ *fp*

Prior address: from _____ **to** _____
_____ **Street** _____ **CITY** _____
STATE _____ **ZIP** _____
Prior landlord: _____
Relationship to you: _____
Phone:(____) _____ - _____
_____ *STREET* _____ *CITY* _____
STATE _____ **ZIP** _____

ANOTHER LANDLORD:
Dates of residency: from: _____ **to:** _____
_____ **Street** _____ **CITY** _____
STATE _____ **ZIP** _____
Other landlord: _____
Relationship to you: _____
Phone :(____) _____ - _____
Landlord's address: # _____ *Street* _____ *CITY* _____
STATE _____ *ZIP* _____

PLACE OF EMPLOYMENT: _____
Phone:(____) _____ - _____
_____ **Street** _____ **CITY** _____
STATE _____ **ZIP** _____
Length of employment: _____ **from:** _____ **to:** _____
Position: _____
Supervisor: _____ **phone # (____) _____ - _____** (over)
Prior employer: _____
Phone:(____) _____ - _____
_____ **Street** _____ **CITY** _____

STATE _____ ZIP _____
Length of employment: _____ from: _____ to: _____
Position: _____
Supervisor: _____ phone # (____) _____ - _____

Children's full name: _____ age: _____
Children's full name: _____ age: _____

Name of next of kin: _____

(That will not be living with you at Sherbrook)

Their Present phone #: (____) _____ - _____

Present address: # _____ Street _____ CITY _____

STATE _____ ZIP _____

Relationship to you: _____

Friends & relatives that have lived at Sherbrook: _____

Where did you hear of this vacancy? _____

Do you require a one or a two bedroom apartment? _____

Any other requirements? _____

Would you be interested in a smoke free building _____

In whose name would you like the security deposit?

Your credit history & references will be checked.

SIGNATURE _____

Date: _____

Are you at least 21 years of age? _____

POLICY & EXPECTATIONS

WE DO NOT ACCEPT DOGS OR CATS OR ANY OTHER PETS!!!! If you give us money to hold an apartment consider this amount non-refundable under any circumstances. This money is however applied to your security deposit. The deposit is held to cover damages, cleaning charges, rent owed and any other charges that may arise. It will be returned to you if there are no charges. Cleaning charges will be deducted for failure to clean the stove, oven, sink, lavatory, bathtub, toilet, etc. It will be returned after the apartment has been vacated and the keys returned. Heat is provided in the apartment. The tenant will provide his/her own electricity. WE EXPECT COMMUNICATION, COOPERATION AND CONGENIALITY BETWEEN TENANTS AND OTHER TENANTS AND BETWEEN MANAGEMENT AND TENANTS, PROMPT PAYMENT OF RENT, PEACEFUL SURROUNDINGS AND CONSIDERATION OF OTHERS AND OBEYING OF RULES AND REGULATIONS.