Oak Brook Commons, LLC

Application to Rent

One Bedroom Apartment, at t	the monthly rate of \$	Garage, at the monthly rate of \$100				
	artment, at the monthly rate of \$	Fireplace, at the monthly rate of \$65				
	artment, at the monthly rate of \$	Vaulted Ceiling w/Skylights, at the monthly rate of \$2				
	artment and storage, at the monthly rate of \$	Senior Discount \$25	, ,			
Upstairs Downs	· · · · · · · —					
	OUR FAX # 518-37	71-8357				
Apartment No	Effective Date:	, 20 at \$	per month.			
PLEASE TELL US ABOUT	YOURSELF:					
Full Name	Date of Birth	SS#				
Phone(s) home	work	other:				
Drivers Lic.#	Veh. Make/Model/Color	Lic. Plate#				
Co-applicant's Name	Date of Birth	SS#				
Phone(s) home	work	ork other:				
Drivers Lic.#	Veh. Make/Model/Color Lic. Plate#					
Other Occupants:						
Full Name		Date of Birth:				
	Date of Birth:					
Current address Rent/Mortgage Per Month \$	How long? Reason	for leaving				
	now long! Reason					
	How long? Reason for leavingPhone					
PLEASE GIVE YOUR EMPL						
Your employment status : Fu			nemployed Other			
	Address					
	Supervisor					
How long at present employer previous employer	Position	If employed less than six (6) months, name and address of			
Co-applicant's employment status	€ Full Time Part Time Student	Retired Unemployed Other	er			
Employer's name	Address					
	Supervisor					
How long at present employer previous employer	Position	If employed less than six (6) months, name and address of			
contact for confirmation. You do	come you would like us to consider, please list i NOT have to reveal alimony, child support or sp Source	pouse's annual income unless you	want us to consider it in this			
Have you ever filed bankrup	otcy? If yes, when?					
PLEASE LIST YOUR RANK	(REFERENCES: Bank Name:	Acet Nu	mher			

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PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:

knowledge. I(We) hereby authorize Oak Brook Commons, any credit bureau or other investigative agency employed by Oak Brook Commons to investigate the references, statements or other data herein listed, obtained from me or from any other person pertaining to my (our) credit and financial responsibility. I (We) understand that the deposit to hold the apartment is NONREFUNDABLE after/_/_ atAM/PM (3 business days). If this application is not accepted by Oak Brook Commons, the deposit shall be refunded, the applicant hereby waiving any claim for damages by reason of non-acceptance which the owner or his agent may reject without stating any reason for doing so. I (We) understand that if for any reason the apartment is not available at the beginning of the term of this lease, I will be entitled to an adjustment of rent on a per diem basis until the apartment is available. I (We) further understand that Oak Brook Commons will not be responsible for any expenses or damages which result from the delay and it will not give me (us) the right to cancel the lease agreement.								
Date Applicant				Co-Applicant				
DEPOSIT RECEIVED in the sum of \$, Check#	this	day of	,20	at	AM/PM Oak Brook		
FOR OFFICE USE ONLY - VERIF	ICATION OF	APPLICAI	NTS GOVERN	MENT ISSUED IL)			
Name:	ID Type:		ID Number	:				
Name:	ID Type:		ID Number					