



Item	Monthly		Amount Paid
Monthly Rent	\$1,750		\$
Security deposit	\$300	Refundable	\$300
Optional			
Parking	\$30	Based on availability	\$
DSL internet	\$35	In-room internet	\$
UNIT #:			Total: \$
Tenant Name:			
Tenant Signature:			Date:
Company Name:			
Company Representative Signature:			Date:

TENANT INFORMATION		
FIRST NAME	LAST NAME	
EMAIL	PHONE ()hm ()cell ()wk	PHONE ()hm ()cell ()wk
CHECK-IN DATE	CHECK-IN TIME	LENGTH OF STAY

CHECK-IN HOURS : M-F 9:00 to 5:00 / SAT. 10:00 to 4:00

PLEASE MAKE PRIOR ARRANGEMENTS IF YOU PLAN TO CHECK-IN AFTER HOURS