

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.