



PremierLivingSuites

Requested Rental Location: _____

Desired Dates of Stay: _____

(This is an approximation of how long you will be in the apartment. It does NOT serve as the required 14 day written notice to vacate.)

Number of Bedrooms Needed: _____

Quoted Rent Amount: \$ _____

Corporate/Company Rental Application

A security deposit of \$200.00 is required before move-in date and will be refunded to the Applicant if there is no outstanding balance remaining for any reason regarding the rented apartment. Deposit will be forfeited if apartment lease/obligations are not fulfilled by Applicant. Any forfeiture of deposit does not credit towards any balance owed. Applicant understands that by signing below they agree to be responsible for all collection fees in the event of any default. Applicant understands that this deposit will hold the requested apartment and that the amount will be forfeited if Applicant decides not to take the apartment and fails to give cancellation notice within 72 hours of submitting this application. Upon vacating, a minimum charge of \$100.00 will be deducted from deposit for housekeeping/redecorating fees. _____ INITIALS

I agree to provide Premier Living Services, Inc. a two week (14 day) written notice before vacating the rented apartment _____ INITIALS

Reference letter is required from Accounting/HR department on company letterhead confirming rental expenses will be paid by company. _____ INITIALS

COMPANY INFORMATION

Company Name: _____ Fed.ID# _____ - _____

Contact Name _____

Street Address: _____

City: _____ State: _____ Zip: _____ Contact phone: (____) _____

Company Phone: (____) _____ Fax: (____) _____ E-Mail: _____

Human Resources Contact: _____ Phone Number: _____

Reason for stay: Temp Need Relocating Dunn & Bradstreet Number: _____

Company Website: _____

RESIDENT INFORMATION

Name: _____ Phone: (____) _____

Social Security Number: _____ - _____ - _____ Cell phone: _____

Present Street Address: _____

City: _____ State: _____ Zip: _____

Position: _____ Email: _____

Supervisor's Name: _____ Supervisor's phone: (____) _____

Pets: ___ yes ___ no How many: _____ Type/Breed(s): _____ Weight(s): _____

If the pet is approved by Premier Living Suites, the following pet fees apply: For each pet 24 lbs. or under, there is a \$200.00 non-refundable fee.

For each pet 25 lbs. or more there is a \$300.00 non-refundable fee. (Maximum of 2 pets per apartment). _____ INITIALS

Proposed Occupants Not Employed By Corporation _____

PAYMENT INFORMATION *CREDIT CARD REQUIRED BUT DOES NOT HAVE TO BE USED AS FORM OF PAYMENT*

Deposit Payment : _____ Cash _____ Check _____ Credit Card _____ Direct Bill

Rent Payment : _____ Cash _____ Check _____ Credit Card _____ Direct Bill

Name on Card:(Please Print) _____

Credit Card # _____ 3 or 4 digit security code: _____ Exp. Date: _____

Address where you receive the credit card statement: _____

City: _____ State: _____ Zip: _____

Approval Signature to Charge Card: _____

How did you hear about our service? _____ Do you need Premier Living Mortgage assistance? ___ yes ___ no

I acknowledge that the information provided in this application is true and correct to the best of my knowledge. Premier Living Services, Inc. is authorized to make any investigation in my personal, financial and/or credit history through any investigative or credit agencies or bureaus.

Company Representative: _____ Date: _____