

The Normandy Apartments

22701 Lake Road

Rocky River, Ohio 44116

440/333-5401 (P)

440/356-9039 (F)

Application for Residency

Name _____

Date of birth _____

Social Security # _____ (Required by City of Rocky River)

Address _____

City/State _____ Zip _____

Phone Number _____

Second Occupant (if any) Relationship _____

Name _____

Date of birth _____

Social Security # _____ (Required by City of Rocky River)

Emergency Contacts

#1 Name _____ Relationship _____

Address _____

City/State _____ Zip _____

Home Phone _____

Work Phone _____

Cell/Pager # _____

Email Address _____

#2 Name _____ Relationship _____

Address _____

City/State _____ Zip _____

Home Phone _____

Work Phone _____

Cell/Pager # _____

Email Address _____

Additional Contact Information

Physician _____

Phone _____

Clergy _____

Phone _____

Hospital _____

Phone _____

Attorney _____

Phone _____

Power of Attorney (if any)

Name _____ Phone _____

Institution/Relationship _____

Address _____

City/State _____ Zip _____

Monthly Income:

Retirement \$ _____

Pension \$ _____

SSI \$ _____

Other \$ _____

TOTAL \$ _____

Will you be bringing your car? If yes complete the following:

*An additional MONTHLY charge of \$50.00 for ONE SPACE, \$75.00 for TWO SPACES will apply and a one time deposit of \$35.00 per remote.

Year _____ Make _____ Model _____ Color _____

Plate _____

Do you have a cat? If yes how many? _____

*A non-refundable \$ 350.00 Pet deposit is required.

Signature of Applicant(s) _____ Date _____

Signature of Applicant(s) _____ Date _____

Signature of POA, if necessary _____ Date _____

*Please do not write below line for Office Use Only

APARTMENT #	ADDITIONAL SERVICES:	MEAL PLAN (S):
_____	_____	_____
RENT QUOTED _____	_____	_____
DEPOSIT QUOTED _____	_____	_____
START DATE (FOR LEASE) _____	_____	_____

- Application Fee \$ 75.00 Date _____ Check no. _____ Amount \$ _____
- Security Deposit (MAY VARY) Date _____ Check no. _____ Amount \$ _____
- Waitlist \$500.00 Date _____ Check no. _____ Amount \$ _____
- *Pet Deposit \$ 350.00 Date _____ Check no. _____ Amount \$ _____
- *Remote Deposit \$35.00 Date _____ Check no. _____ Amount \$ _____