


DAVID S. BROWN
ENTERPRISES, LTD.

I, _____, a representative of _____, agree to participate in the David S. Brown Enterprises, LTD. Preferred Employer program. Upon signing this form, our employees will begin receiving the following benefits:

- Application fee refunded at move-in*
- Assistance with setting up utilities
- One free rental of a David S. Brown Enterprises, LTD. clubroom or clubhouse, if available
- One month calendar day notice to transfer from one David S. Brown Enterprises, LTD. community to another **
- Fully furnished short term apartments available
- Employer is listed as a participant in the program

Note: In order to qualify for Preferred Employer Program benefits, resident must be current on rent.

*Application fee required when applying and refunded at move-in.

** Transfer conditions still apply except transfer fee waived.

Upon signing of this form, I authorize our Human Resources or Relocation Department to promote David S. Brown Enterprises, LTD. apartment communities to our employees. This may consist of the distribution of marketing materials such as brochures, flyers, websites, newsletters, etc.

Signature

Date

Printed Name

Title

Leasing Consultant Name

Regional Management Approval

Company Contact: _____
Address: _____
City, State: _____
Phone: _____ Fax: _____
Email: _____