

MALLARD LAKE APARTMENTS
Live Smart at Mallard Lake!

RESIDENT REFERRAL BONUS AGREEMENT

NEW RESIDENT:

I attest that my first knowledge of Mallard Lake Apartments was from the current resident(s) by the name(s) of _____ whom live at

(Names of Current Residents)

_____. I understand that they will receive the resident referral bonus
(Address)

offered at the time of my application submission and that no other outside agency will receive a commission based on my living here.

New Resident _____

New Resident _____

Amount of Referral Bonus: \$ _____
(Mallard Lake Staff to Complete)

EXISTING RESIDENT:

I agree that I did refer _____ to live in _____ at
(Name of New Resident) (Address)

Mallard Lake Apartments. I understand that I will receive a check for the resident referral bonus in the amount offered at the time of the referred resident's application submission, providing my account with Mallard Lake is not in a delinquent status and I am still a current leaseholder. I understand the check may take up to 14 days to be processed and mailed once this form is submitted.

Current Leaseholder _____ Apartment _____

Current Leaseholder _____ Apartment _____

For Office Use Only

RECEIVED BY: _____ DATE: _____

IN PERSON / FAX / DROPBOX / OTHER _____