

WESTMORE APARTMENTS  
*Premium Living at Affordable Pricing!*

# RESIDENT REFERRAL BONUS AGREEMENT

**NEW RESIDENT:**

I attest that my first knowledge of Westmore 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: \$ \_\_\_\_\_  
(Westmore Staff to Complete)

**EXISTING RESIDENT:**

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

Westmore 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 Westmore 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. I also understand that should the resident I referred terminate their lease because it end-date, I will be required to repay Westmore Apartments the prorated value of my referral bonus.

Current Leaseholder \_\_\_\_\_ Apartment \_\_\_\_\_

Current Leaseholder \_\_\_\_\_ Apartment \_\_\_\_\_

*For Office Use Only*

RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

IN PERSON / FAX / DROPBOX / OTHER \_\_\_\_\_