

# THE KAMSON CORPORATION

## COMMUNITIES FOR BETTER LIVING

### Laurelton Village

601 North Black Horse Pike, Williamstown, NJ 08094

Phone Number: (856) 629-4311

Fax: (856) 875-0143

#### How to claim your \$250.00 Cash Back Reward.

To be eligible you must indicate to the rental agent at the property that you located the apartment on "www.laureltonvillage.com," qualify to lease the apartment according to the requirements of the property and sign both a new 1 year and the Laurelton Village Apartments Lease Report Claim Form. You must not be an existing resident and further you must, move into the Laurelton Village Apartments, and reside there for at least 30 days. Your name must appear on the lease agreement as an occupant. Only one Cash Back Reward will be issued per lease.

This \$250.00 Cash Back Reward may not be combined with any other reward program and is available only once for the unit rented and not to each co-resident. Prospective residents will not qualify to receive this \$250.00 Cash Back Reward if for any reason they do not qualify to be a resident based on the application process. Residents will not qualify to receive this \$250.00 Cash Back Reward if they find their new home using other online or offline resources or are otherwise associated with the property, such as:

- ❖ Existing residents at the rental property.
- ❖ Renters who may have previously lived in a property that is owned or managed by an affiliate of the property listed on the lease report form.
- ❖ Residents who are current or former employees of the property or a property that is owned or managed by an affiliate of the property listed on the lease report form.
- ❖ Renters who find their home using other websites.
- ❖ Residents who have been referred by an apartment locator or an existing resident of the property.

Expected Timing for Receipt of \$250.00 cash back reward and processing the Lease Report Claim Form usually takes 4-8 weeks from your move-in date.

**The \$250.00 cash back reward will be applied as a credit against your account.**

By signing your agree to all the terms in this agreement.

**APPLICANT NAME** \_\_\_\_\_ **Date of birth** \_\_\_\_\_ **SS#** \_\_\_\_\_  
First Middle Last

App. Drivers Lic. No. \_\_\_\_\_ State \_\_\_\_\_

**APPLICANT** Home Phone# \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Present Address \_\_\_\_\_

E-mail \_\_\_\_\_

**APPLICANT SIGNATURE** \_\_\_\_\_

Revised 9/24/13