



10255 42nd Ave  
 Allendale, MI 49401  
 (616) 895-6678  
 info@campusviewhousing.com

# Full Deposit Leasing & Administrative / Activity Fee Requirement

Property: \_\_\_\_\_  
 Unit: \_\_\_\_\_

## Lease Addenda

I «primary\_applicant\_name\_full» understand that by signing this lease I am entering into an agreement to pay all charges, fees and rent due under the lease for the full rental term.

Lease Term Beginning: \_\_\_/\_\_\_/\_\_\_\_ Ending: \_\_\_/\_\_\_/\_\_\_\_ (at noon)  
 Number of Payments: \_\_\_\_\_ Monthly Rent Rate: \$ \_\_\_\_\_  
 Total Lease Term: \$ \_\_\_\_\_

**Fees:** Activity Fee (\$350 Annual) Activity Fee is non-refundable/non-transferrable  
 Security Deposit Minimum Requirement \$300 per person or \$600 if single occupancy unit.  
 Security Deposits are refunded within 30 days of move out when applicable.

I «primary\_applicant\_name\_full» understand that B-B-G Housing Corporation dba Campus View Apartments & Townhomes will hold the unit for which I have paid a partial administrative/activity fee (the "Fee's") until \_\_\_/\_\_\_/\_\_\_\_ (the "Due Date"). Upon this date, I understand that the remaining balance of the Fees and Deposit is due.

After the Due Date, if the remaining balance of the Fees and Security Deposit have not been PAID IN FULL, I understand Campus View has the ability to re-let the unit on my behalf. If at any time the unit is re-let I will be held responsible for any outstanding balance remaining and there will be a \$300 lease change fee charged against the security deposit. Until the unit is re-let, I am not absolved of my responsibility to the lease agreement.

### Applicant & Unit Information:

Name: «primary\_applicant\_name\_full» Unit #: «unit\_address\_line1»  
 Date of Birth: «primary\_applicant\_birth\_date» Floor Plan: «floor\_plan\_name»  
 Email: «primary\_applicant\_email\_address» Phone: «primary\_applicant\_phone\_number»

### Leasing Fee's Requirement (Total Fee's \$ \_\_\_\_\_)

Activity/Administrative Fee: \$ \_\_\_\_\_ Security Deposit Amount: \$ \_\_\_\_\_

### Payment Information:

Amount Paid: \$ \_\_\_\_\_ Payment Received On: \_\_\_/\_\_\_/\_\_\_\_  
 Payment Type: \_\_\_\_\_

Remaining Balance of Fee's & Security Deposit due on or before: \_\_\_/\_\_\_/\_\_\_\_

Remaning Balance Due: \$ \_\_\_\_\_

I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS OUTLINED IN THIS DOCUMENT