



FRASIER

DATE: _____

Independent Living Priority List Application

Please complete and return this form to Frasier with payment: an application fee of \$1,500 for a single occupancy or \$3,000 for dual occupancy which includes a refundable deposit of \$1,000 per person. Please make check payable to Frasier.

GENERAL INFORMATION: 1st Person

GENERAL INFORMATION 2nd Person

Last Name: _____

Last Name: _____

First Name: _____

First Name: _____

Street Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Email: _____

Email: _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Date of Birth: _____

Date of Birth: _____

Married Partnered

Married Partnered

Widowed Divorce Single

Widowed Divorce Single

APARTMENT

Type of Apartment: (select all that apply)

1 Bedroom 1 Bedroom +Den

2 Bedroom 2 Bedroom +Den

Studio

Pets: (select all that apply)

Dog(s) How many? _____

Cats(s) How many? _____

OTHER CONTACT

Name: _____

Email: _____

Phone: _____

Relationship: Daughter Son Sibling Other

May we share information about your interest in moving to Frasier with this person?

Yes No

How did you hear about Frasier? _____

ESTIMATED MOVE-IN DATE: _____ (Required to be included on our Wait List.)
month/year

