

RICHLAND PLACE  
WAITING LIST DEPOSIT AGREEMENT

\_\_\_\_\_ (Applicant(s)) hereby deposit \$1,500 with Richland Place, Inc., which will be deposited into an account at Regions Bank in Nashville, Tennessee, thus placing Applicant(s) on a Waiting List for \_\_\_\_\_ apartment home at Richland Place.

Applicant(s) understand that when an apartment home of their choice is available for occupancy they will be so notified by Richland Place. Depending on the apartment availability the Applicant(s) will have a reasonable time period in which to make a decision. If the Applicant(s) wish to occupy the offered apartment home they will enter into a Residency & Care Agreement and become Resident(s) of Richland Place. The \$1,500 deposit will be applicable to the Entry Fee. Should the Applicant(s) chose to remain on the Waiting List, the Applicant(s) would be notified upon the next availability of their choice apartment home. Should Applicant(s) decide, for any reason, to have their name removed from the Waiting List, the deposit shall be refunded without interest.

After three (3) years of being on the Waiting List, the Applicant(s) \$1,500 deposit will not be refunded. The deposit will continue to be applicable to the Entry Fee.

Should Applicant(s) decide to become a resident of Richland Place, Applicant(s) agree that prior to executing a Residency & Care Agreement, Applicant(s) will be requires to provide necessary information to establish that Applicant(s) who intend to reside at Richland Place complies with age, financial and health requirements of Richland Place. In addition, Applicant(s) may be required to undergo additional medical review prior to executing the Residency & Care Agreement. Richland Place reserves the right to disqualify any Applicant if all requirements are not satisfied.

Name(s) \_\_\_\_\_ Birthdate \_\_\_\_\_

\_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Signature of Applicant(s) \_\_\_\_\_  
\_\_\_\_\_

Please make check payable to Richland Place, Inc. and return it with a signed copy of this agreement to the Sales/Marketing Department, 500 Elmington Avenue, Nashville, TN 37205.

RICHLAND PLACE, INC. \_\_\_\_\_