

Daisy

ALCOVE STUDIO
600 SQ. FT.



DATE _____

RESIDENCE NUMBER _____

PREPARED BY _____

ONE-TIME COMMUNITY FEE

MONTHLY FEE

SECOND-PERSON FEE

OTHER

\$ _____

\$ _____


\$ _____

\$ _____

TOTAL MONTHLY FEE

\$ _____

*Floor plans are not to scale and are shown for comparative purposes only.
Actual apartment floor plans may have minor variations.*

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