

ASSOCIATION, INC.

## **TENANT LEASE APPLICATION**

Owner Information				
Address of Leased Unit:			# Bedrooms	_ # Baths
Print Unit Owner Name:				
Unit Owner's Phone: (Home	e)	(Cell)		
Unit Owner's Email:				
Tenant Information				
Tenant Full Name(s):				
Name on Lease (if different)	:			
Tenant's Phone: (Home)		(Cell)		
Tenant's Email:				
Anticipated Move in Date:			Lease Term: _	
Number of Occupants: Total Adults		Children	Minors Ages	
NOTE: Additional pet guid Automobiles: How many au All vehicles must fit in the dr Make	tomobiles?	_		
Al	ong with this Tenant Leas	se Application, pleas	se Include:	
	ne verbiage specified in A ight to terminate the lease the provisions of the Declar rulations, if any.	rticle XIII, Section 1 in the name of and a ation, the Articles of attention the terms and conall policies adopte	of the Declarations s agent for the less Incorporation, By-Laditions of the Ded by the Associa	s of Covenants: 7 or upon default by a aws of the Associat claration togethe tion.
Unit Owner Signature		Date		