TUSCANY SUBDIVISION AT TAMPA PALMS

OWNERS ASSOCIATION, INC.

NEW TENANT APPLICATION

EACH SUBMISSION MUST INCLUDE:

- 1. \$100 Lease Application Fee (via Check or Money Order ONLY, payable to: Tuscany at Tampa Palms)
- 2. A copy of the executed lease with a term of not more than one year.

PLEASE BE AWARE:

- The owner <u>must own the home for twelve (12) months prior to renting/leasing.</u>
- All information must be complete and received at least 14 days before lease is to commence.
- The owner must receive approval before the tenant moves into the home.
- Lease renewals must be for a full year ONLY, month-to-month leases are prohibited.

GENERAL INFORMATION:

Address of home being lease	ed:				
Number of Occupants:		Adults	Ch	nildren/Minors	Total
Names of Occupants:			•		
A	dult #1				
A	dult #2				
Minor					Age
Minor					Age
	Minor			Age	
Lease in Name(s) of:					
Tenant's cell phone number					
Tenant's email address					
Number of pets:		Dogs		Cats	Other (specify)
AUTOMOBILES: All cars must fit in the d	riveway	or garage. Cars mu	ıst fit i	n the driveway witho	ut blocking the sidewalk.
How many autos?					
Make		Model		Color	Tag
	<u> </u>				
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NEW TENANT APPLICATION (Continued)

The potential tenant has been provided a copy of the "Deed Restrictions" for Tuscany:	NO
Term of lease:	
Anticipated move in date:	
SIGNATURES:	
Unit Owner (not their agent): By signing below, the Unit Owner attests that all information is correct and that it accurately nature of the occupancy. The owner also confirms they have owned the property in question for of twelve (12) months prior to this lease period, in keeping with Article V, Section 5 of the Declaration.	or a minimum
Unit purchase date:	
Printed name:	
Signature:	
Date signed:	
Tenant: By signing below, the tenant confirms they have received a copy of the Governing Docurestrictions), have read and understood them, and will comply with them.	ıments (deed
Tenant #1 signature:	
Tenant #2 signature:	
Date signed:	
<u>Board</u>	
Signature:	
Approved:	
Denied:	
Date signed:	

