OWNER APPLICATION FOR APPROVAL TO LEASE UNIT

Date:						
To:	("Association")					
Owner / Unit Information						
Name(s):						
	Unit Number					
Phone:	Alt. No					
copy of the proposal Lea Owner understand that the unit as a single-family rea The unit may not be use allowed. The unit may not be use	d for daily, short term, or vacation rentals. No AirBnB are d for storage or any commercial purpose. ant with copies of the Bylaws and Rules & Regulations.					
Permissible No. of re	rntal units:					
	nted/leased:					
•	Board of Directors:					
	rd: Approved Denied					
NCGSON TO DENTAL.						

Tenant Registration

Date:			
Tenant Name:			
Tenant Phone:			
Tenant Email:			
Other Residents Occupying the	Unit:		
Name:		_ Relationship: _	
Phone:		Email:	
Vehicle:	_ Color:		Tag #:
Name:		_ Relationship: ₋	
Phone:		Email:	
Vehicle:	_ Color:		_Tag #:
Name:		Relationshin:	
Phone:			
Vehicle:			
Tenant acknowledges that the L the Bylaws and Rules and Regul Regulations. Should the tenant of other action by the Board of Dire	ations and d	oes hereby agre	ee to follow these
Tenant Signature:			