

# CHARING CROSS

## TENANT REGISTRATION FORM

ASSOCIATION UNIT ADDRESS\_\_\_\_\_

UNIT OWNER(S):

NAME(S)\_\_\_\_\_

ADDRESS\_\_\_\_\_

PHONE# (HOME)\_\_\_\_\_ (OFFICE)\_\_\_\_\_

TENANT(S):

NAME(S)\_\_\_\_\_

ADDRESS\_\_\_\_\_

PHONE# (HOME)\_\_\_\_\_ (OFFICE)\_\_\_\_\_

CAR(S) MAKE, MODEL AND LICENSE PLATE\_\_\_\_\_

\_\_\_\_\_

LEASE START DATE\_\_\_\_\_ LEASE END DATE\_\_\_\_\_

AUTOMATIC RENEWAL YES\_\_\_\_\_ NO\_\_\_\_\_

PETS ALLOWED YES\_\_\_\_\_ NO\_\_\_\_\_

NUMBER AND TYPE\_\_\_\_\_

As the Landlord/Owner of the above referenced unit in the Charing Cross Condominium Association, I verify that the above information is correct and I have provided a copy of all necessary Association Rules/Regulations/Restrictions to my tenant. As the Landlord/Owner I am responsible for the actions of my tenant and any guests or occupants of the unit. **I have attached a copy of my written lease agreement as required by Article IX of the Association's Declaration.**

Owner's Signature\_\_\_\_\_ Date\_\_\_\_\_