

NON OWNER OCCUPANCY APPLICATION & Memorandum of Understanding

Check one: Renter Lessee Family Member Temporary Custodian**

****Note: Temporary Custodian's request to be submitted to the Board 30 days prior to occupancy.**

I hereby apply for occupancy at the address listed below:

PLEASE PRINT

Address: _____

Lot # _____ Block # _____ Sect# _____ Property # _____

Owner(s) Legal Name (print): _____

Owner(s) Signature: _____

Owner Day Phone: _____ Owner Cell Phone : _____

Applicant's Legal Name (print): _____

Applicant's Proof of Age I.D.: Type: _____ Number: _____

This document must be accompanied by a photocopy of legal document showing age, such as a driver's license, passport, military ID, or DMV non-driver identification card of applicant.

List names of person(s) who will live with applicant (if more than two, attach additional list)

Name: _____ DOB: _____ Relationship: _____

Name: _____ DOB: _____ Relationship: _____

Applicant Day Phone: _____ Applicant Cell Phone : _____

Applicant # 2 Day Phone: _____ Applicant # 2 Cell Phone : _____

In case of emergency please notify (recommended information)

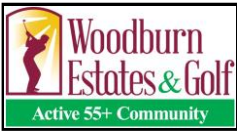
Name: _____ Day Phone: _____ Cell: _____

Address: _____ City: _____ State: _____ Zip: _____

Optional Information: Applicant's former residence location of more than one year.

City: _____ State: _____ Zip: _____

READ AND SIGN ON REVERSE SIDE



NON OWNER OCCUPANCY APPLICATION & Memorandum of Understanding

NON OWNER MEMORANDUM OF UNDERSTANDING

Renter, Lessee, Family Member, or Temporary Custodian

In applying to occupy the dwelling house previously described, as a tenant, within the corporate area of Woodburn Estates & Golf, I acknowledge that the owner has given and I understand and will comply with all applicable provisions of the Declaration of Restrictions; Articles of Incorporation; Bylaws of the Association and Rules and Regulations. I also understand that I am not a member of the Association by this action. After being qualified and approved by the Board of Directors to occupy this dwelling house I may apply for an Associate plan

I understand that included in applicable provisions mentioned above at least one of the occupants of this dwelling house must be at least 55 years of age, and no one under 18 years of age may reside in the home. Further, any resident and or their guests must abide by the Rules and Regulations established by the Board of Directors. If I am a Temporary Custodian (not renting or leasing) I understand that I am limited to 7 months during a 12 month period. I agree to be responsible for any other residents and or guests at the property and see that they abide by all rules and regulations.

Non Owner Occupant Signature(s):

Legal Name: _____ Date: _____

Legal Name: _____ Date: _____

Owner(s) Certification: I certify that all occupants of this Property do qualify with the age restrictions set forth in the Declaration of Restriction that I have provided. Further, provisions of the Articles of Incorporation, Bylaws, Declaration of Restrictions, and Amendments thereto, and the Rules & Regulations shall be binding to both parties.

Legal Name: _____ Date: _____

Legal Name: _____ Date: _____

This Section for Office Use Only:	
Date Received in Office: _____	By Staff Member: _____
This Application has been <input type="checkbox"/> Accepted <input type="checkbox"/> Rejected Date _____	
Board of Directors Signatures	_____

