

SAN MARCO HOMEOWNERS ASSOCIATION, INC.

LEASE/RESALE RESIDENT APPLICATION

DATE: _____ UNIT ADDRESS: _____

APPLICANT INFORMATION:

NAME 1: _____ DATE OF BIRTH: _____

PRESENT ADDRESS: _____

SOCIAL SECURITY: _____ DRIVERS LICENSE/STATE: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

NAME 2: _____ DATE OF BIRTH: _____

SOCIAL SECURITY: _____ DRIVERS LICENSE/STATE: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

NO. OF ADULTS: _____ NO. OF CHILDREN: _____

LIST ALL PERSONS TO OCCUPY UNIT NOT LISTED ABOVE:

NAME	RELATIONSHIP	AGE
------	--------------	-----

1) _____		
----------	--	--

2) _____		
----------	--	--

3) _____		
----------	--	--

.....
EMPLOYER: _____

TITLE: _____ YEARS: _____

ADDRESS: _____ WORK NUMBER: _____

SPOUSE'S EMPLOYER: _____

TITLE: _____ YEARS: _____

ADDRESS: _____ WORK NUMBER: _____
.....

SAN MARCO HOMEOWNERS ASSOCIATION, INC.

PET INFORMATION: (MAXIMUM OF 2 PETS NO MORE THAN 25 POUNDS EACH)

TYPE BREED COLOR WEIGHT AGE LICENSE NUMBER

1. _____

2. _____

BANK INFORMATION

BANK NAME: _____ **ACCT #:** _____

ADDRESS: _____ **ZIP CODE:** _____

AGE OF ACCOUNT: _____ **YEARS** **CHECKING:** _____ **SAVINGS:** _____

PHONE NUMBER: _____

CHARACTER REFERENCES

NAME: _____ **PHONE NUMBER#:** _____

ADDRESS: _____

NAME: _____ **PHONE NUMBER#:** _____

ADDRESS: _____

AUTOMOBILE INFORMATION

VEHICLE #1

MAKE: _____ **MODEL:** _____ **YEAR:** _____

TAG: _____ **STATE:** _____

VEHICLE #2

MAKE: _____ **MODEL:** _____ **YEAR:** _____

TAG: _____ **STATE:** _____

VEHICLE #3

MAKE: _____ **MODEL:** _____ **YEAR:** _____

TAG: _____ **STATE:** _____

SAN MARCO HOMEOWNERS ASSOCIATION, INC.

EMERGENCY CONTACT INFORMATION:

NAME: _____

PHONE: _____ RELATIONSHIP: _____

ADDRESS: _____

-
- I (We) fully authorize investigation of all answers and references given on the application.
 - I/ (We) authorize the Association to perform a criminal and financial background check on all applicants.
 - I (We) fully acknowledge H.O.A. restriction of a two (2) year primary residency requirement prior to the unit being leased.
 - I (We) fully acknowledge and agree that lessee may not park a trailer, boat, van, camper, truck, or commercial vehicle at the San Marco H.O.A. community.
 - I (We) hereby agree to abide by all Documents and Rules and Regulations of San Marco Village Homeowners Association, Inc. Owner must review the documents with the Lessee.
 - Lessee agrees that the terms of the attached lease are within the requirements of San Marco Homeowners Association Rules and Regulations pertaining thereto.
 - Renters are not allowed to sub-lease their apartment at any time.
 - Lessor/Owner acknowledges that they are responsible for Association assessments.
 - Attached is the non-refundable application fee of **\$ 60.00 per adult made payable to San Marco H.O.A., Inc.** and the non-refundable processing fee of **\$ 75.00 made payable to Carolina Management Services, Inc.**
 - Please include a copy of a Driver's License for each applicant.
 - If any question is left blank, this application will not be processed and it will be returned to you.
 - This application is subject to approval by the Board of Directors.
 - Willful misrepresentation will void any lease, contract, or agreement entered in connection with this application.
 - I (We) declare that the above information to be true and correct.
 - I (We) release the screening service company, its employees, and its members from any loss, expenses, or damages sustained directly or indirectly from information or reports furnished by the screening service company, as well as Carolina Management Services, Inc. and the Association.

LESSEE(S): (TENANT)

_____ DATE: _____

_____ DATE: _____

LESSOR(S): (OWNER)

_____ DATE: _____

_____ DATE: _____

BOARD APPROVAL:

_____ DATE: _____

_____ DATE: _____

_____ DATE: _____