



Condominium

# INVERNESS VILLAGE CONDOMINIUM ASSOCIATION, INC.

## Lease Information Sheet

Date: \_\_\_\_\_ Unit #: \_\_\_\_\_ Owner's name: \_\_\_\_\_

**Lease may not exceed 6 months without Board approval.  
Refer to By-Law**

Name as it will appear on lease: \_\_\_\_\_

Spouse name as it will appear on lease: \_\_\_\_\_

Current address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Driver's Lic. #: \_\_\_\_\_ Spouse Driver's Lic. #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Spouse Date of Birth: \_\_\_\_\_

**Names of all persons who will occupy the residence. No more than 4 may occupy a residence. Refer to By-Law  
No sub-letting allowed.**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

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Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Tag: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Tag: \_\_\_\_\_

Has the applicant or any person who will occupy the residence been convicted of a felony:  
Yes ( ) No ( )

If yes, please use the back of this sheet to explain in detail the nature and disposition of the conviction.

**Please give a copy of the Community Documents to the Tenant and/or Rental Agent.**