SUMMERGLEN HOA

TENANT INFORMATION SHEET

info@hcmanagement.org

To be completed for all instances of leasing a home within the community.

Address of Unit:						
Owner/Landlord Nat	me:					
Tenant(s) Name:						
Home Telephone # _				Cell#		
Please list ALL occu	ipants who	will reside in	the home:			
Name		Age		Relationship to Primary Tenant		
How many pets?	Dogs	Cats	Other Pets	(What kin	ıd)	
Vehicle Make		Color	Та	g#	State	
Vehicle Make		Color	Та	g#	State	

Please provide the following attachments with this completed document to the management company:

• Copy of the executed lease

Summerglen Homeowners Association is a deed restricted community as such, I/We agree to abide by the Covenants, Conditions, Restrictions, and easements of the Association. I further understand that if I/We fail to comply with the community's governing documents, or Florida Statutes and laws, action will be taken against me and I will be responsible for paying any fees that accrue including attorney fees, if necessary.

Signature of Tenant

Signature of Tenant