

**APPROVAL REQUEST FOR LEASE
INDIAN SPRINGS CONDOMINIUM ASSOCIATION**

SPECIAL NOTE: This request for approval of LEASE must be in the possession of Ameri-Tech at least fifteen (15) days prior to approval. All supporting documents and a check for \$100 payable to Indian Springs must accompany this application.

Unit # _____ Leasing Period: _____ Owners Name _____

Main Phone # of Renter: _____

Rental Agent: _____ Phone _____

Renter(s) represents that the following information is true and correct and hereby consents to the Association's inquiry and investigation concerning this or any other information provided or deemed necessary for approval of this request. Applicant agrees that a background check, (criminal history). Any material misstatements as to the buyer's statements contained herein, may be grounds for denial.

1) LIST ALL Occupants: (Maximum of 2 people per bedroom)

1. _____

2. _____

3. _____

4. _____

2) LIST ALL AUTOMOBILES (Maximum of 2 vehicles allowed)

Make/Model/Year:

_____ Color: _____ Tag#: _____

Make/Model/Year: _____ Color: _____ Tag#: _____

_____ # of Pets (Must submit along with the application a copy of shot records)

_____ Type, Weight, color
etc.

Renter (s) states that a copy of the Rules and Regulations have been received, read, and understood. Renter(s) hereby agrees to abide by all of the conditions and terms therein and all rules and regulations officially enacted hereafter by the Association.

Renter Signature

Renter Signature

Date

_____ ENCLOSE A FEE OF \$100. PAYABLE TO: Indian Springs

_____ ENCLOSE SIGNED RULES AND REGS (ATTACHED)
MAIL ALL ABOVE REQUESTED INFORMATION TOGETHER TO:

AMERI-TECH

24701 US Hwy 19 Suite 102

Clearwater, FL 33763 Office Phone: (727) 726-8000 / Fax to 727-723-1101