

TERN BAY HOMEOWNERS ASSOCIATION INC
545 Pinellas Bayway S., Tierra Verde, Fl. 33715
Email: manager@ternbay.com
Visit our website at: **www.ternbay.com**

APPLICATION FOR LEASE

TBHA is a deed-restricted development. Everyone owning or residing at Tern Bay is subject to the governing documents of the association. In order to ensure that all parties are appropriately informed and to promote compliance with these documents, the board of directors has instituted this Lease Application which must be submitted to the board prior to leasing a unit.

In addition, a background investigation form must also be filled in. The background check is what the fee covers.

This application and the background investigation form are both available on the website under "view/download association forms"

PROCESSING FEE - \$100.00 Per Signatory of the Lease (Must be attached)

Name of Owner _____ UNIT NO. _____
I hereby notify my intent to RENT my unit to:
Renters Name (s) _____ Tel. _____
Signature of Owner _____ Date _____ Proposed Rental Date _____
Real Estate Co./Agent _____ Tel _____

LESSEE'S STATEMENT

I intend to lease unit # _____, of TERNBAY TOWNHOMES, located at 545 Pinellas Bayway, Tierra Verde Fl. 33715.

Number of adults to occupy unit _____ Number of children to occupy unit _____.

The owner has made available to me the appropriate By-Laws, Rules and Regulations as they pertain to the above unit and the community.

I hereby agree for myself and on behalf of all persons who may occupy the unit that I (we) will abide by all of the restrictions, By-Laws, rules and regulations of TBHA INC. and any future restrictions lawfully imposed by the Board of Directors.

I am aware that the Association has certain restrictions concerning pets. We do/do not have a pet(s) Description of all pets _____

I understand that any lease is restricted to a one-year minimum term.

Lessee is subject to a background check. A second application is required as noted above for this purpose.

Lessee Signature _____ Witness Signature _____

Print name _____ Print name _____

Co-Lessee Signature _____ (if applicable) Print name _____

Signature of TBHA Board Member

Board Member's Name and Title (print)

Corporate Seal Required for Approval.

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