

HALF MOON BAY CONDOMINIUM ASSOCIATION, INC.

OCCUPANT RENTAL APPLICATION FORM

Effective: January 1, 2012

UNIT NO: _____ UNIT ADDRESS: _____ OWNERS' NAME: _____

The undersigned is applying to occupy the unit named above at the address listed above at the Half Moon Bay Condominium Association, Inc. as a tenant during the absence of the owner for the period from: _____ to: _____.

The undersigned agrees to abide by the Association's Declaration of the Condominium, its By-Laws and its Rules & Regulations as amended. The Association's Rules & Regulations were compiled to assure all homeowners and occupants an enjoyable and harmonious stay at Half Moon Bay. In the event of a violation of these governance documents or any of the Rules & Regulations and the following procedure set forth in the Association's Rules and Regulations Compliance Statement, the Board may take action against the owner or occupant(s).

Violations of Rules & Regulations may result in the renter or guest being evicted.

OCCUPANT/RENTER'S NAME: _____

CURRENT/PRIOR ADDRESS: _____

PHONE: (INDICATE HOME BUSINESS OR CELL) _____

Additional phone/contact: _____

Email Address: _____

Employer/Address: _____

Renter's Insurance Carrier: _____

Name of Spouse/Significant Other: _____

Names & Ages of All Other Occupants or anticipated overnight guests:

Type of Vehicle(s): _____ License Plate #: _____ State: _____

Vehicle Insurance Carrier: _____

Business References:

Name:

Address:

Phone:

Personal References:

Name:

Address:

Phone:

Have you ever rented at Half Moon Bay Condominiums Before: NO ___ YES ___ Date _____

Previous Landlord: _____ Phone: _____

I /We acknowledge that we have reviewed and agree to abide by the Association's Declaration of Condominium, its By-Laws and its Rules & Regulations, as amended.

Signature of Applicant/Occupant

Signature of Applicant/Occupant

Date: _____

Date: _____

Include Photo copy of Driver's License or Government Issued ID for each Occupant
\$100 Fee is Required

Board of Directors

Form Submitted to: _____

Date: _____

Phone: _____

Approved by Board of Directors

Signature of Board Member: _____

Date: _____