

FOREST PARK I HOMEOWNERS ASSOCIATION, INC.

Tenant Information Form

Rental Property Address: _____

Homeowner (Landlord) Name: _____

Homeowner Mailing Address: _____

Homeowner Telephone Number and Email: _____ / _____

Name of Designated Agent (if applicable): _____

Address of Designated Agent: _____

Telephone Number and Email of Designated Agent: _____ / _____

Length of Lease: _____ Beginning Date: _____ End Date: _____

Tenant Name(s): _____

Tenant Telephone Number and Email: _____ / _____

Tenant's Vehicle Information (license to include State of Issue and Number):

No. 1: License: _____ Make / Model: _____ Color: _____

No. 2: License: _____ Make / Model: _____ Color: _____

I (we) attest, by our signatures below, have received, read and agree to abide by the CC&Rs, By-Laws and Rules and Regulations (and as altered or amended) of Forest Park I Homeowners Association (FPHOA) knowing that if they are not adhered to, the Homeowner will ultimately be either fined or other legal remedy may be pursued (which may extend to Tenants) for violations in accordance with Florida Statutes §720.305 and FPHOA's Violation and Fine Policies and CC&Rs (as amended).

Signature of Tenant

Date

Signature of Tenant

Date

Signature of Tenant

Date

Signature of Homeowner (Landlord)

Date

Signature of Designated Agent (if applicable)

Date

I hereby also delegate authority to the above Designated Agent to act on my behalf in dealings with FPHOA regarding this rental property and tenant(s) per Florida Statutes §720.301(9) and FPHOA's Rules and Regulations.

Signature of Homeowner (Landlord)

Date

This form must be completed and returned to FPHOA's Management Company via mail, fax, or email within 5 days from the signing of any lease for any Tenancy per FPHOA's Rules and Regulations

Effective 06/01/2021 (This is the initial version of this form)