

**OWNER APPLICATION FOR APPROVAL TO LEASE UNIT AT THE OAKS**

Date:\_\_\_\_\_

To the Oaks Condominiums Property Owners Association

**Owner/Unit Information**

Name(s):\_\_\_\_\_

\_\_\_\_\_

Unit/Address:\_\_\_\_\_

Phone:\_\_\_\_\_Alt. No:\_\_\_\_\_

Email:\_\_\_\_\_

The above Owner(s) hereby request approval to lease the above described unit. A copy of the proposed lease and background check is submitted with this Application.

Owner Signature(s):

\_\_\_\_\_date:\_\_\_\_\_

\_\_\_\_\_date:\_\_\_\_\_

The following information must be provided to the Board of Administration or Manager when lease contract is signed:

1. Copy of signed lease contract
2. Copy of signed "Rules of Conduct document" per Tenant
3. Copy of completed "Lease Information Form" per Tenant

***Board approval will be provided upon receipt of the above information and documentation.***

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**FOR BOARD USE ONLY**

**Date considered by Board of Directors:**\_\_\_\_\_

**Action taken by the Board: Approved**\_\_\_\_\_