SONOMA BAY HOMEOWNERS' ASSOCIATION, INC. Lease Renewal

Date:

Sonoma Bay Address

Tenant:	Phone:
	Phone:
LEASE AND OCCUPANCY RESTRICTION	DNS:
shall have the right to terminate the any of the provisions of the Declarat	pproved by the Master Association and shall provide that the Master Association lease in the name of and as agent for the lesser upon default by tenant in observing ion, the Articles of Incorporation, By-Laws of the Master Association and applicable its shall also be subject to the prior written approval of the Master Association.
Tules and regulations. Leasing of on	ts shall also be subject to the prior written approval of the Master Association.
APPROVAL:	
, ,	written certificate of approval by the Master Association prior to unit occupancy. ts must complete an orientation prior to unit occupancy.
No lease will be renewed, if	the tenant (s) do not have or purchase a Bar Code.
All prospective tenants must comple	te a Master Association Application and must submit the following documents:
Sonoma Bay Association Re	newal Application
Residential Screening Autho	rization Form
Copy of fully executed Lease	e Agreement
Copy of Signed Receipt of So	onoma Bay Rules and Regulations
Copy of Vehicle Registration	—Must be in name of Prospective Tenant & Proof of Insurance
Pet Registration Form along	with up-to-date shot records, registration and up-to-date pet picture (please see
office for additional informa	cion.)
Copy of Landlord's Occupati	onal License-Available from City of Riviera Beach
Subsidized Housing Voucher	

Please complete form in its entirety

SONOMA BAY HOMEOWNERS' ASSOCIATION, INC.

APPLICATION FOR LEASE RENEWAL

Please complete all ques	tions and fill in all blanks.	. If application is inc	complete, this may res	sult in your application not	
being processed and/or	not approved. If the ques	tion does not apply	, answer N/A. Print le	egibly or type all information.	
Sonoma Bay address of p	property to Lease:				
Owner's Name:Occupational License #					
Date: Date of Occupancy:					
1. Tenant Information:					
		Date of Birth			
		Email Address			
		Date of Birth			
Contact Phone #		Email Add			
Driver's License MUST ha	del and tag numbers of al ave Sonoma Bay Address Model	to get a sticker or t	ransponder.		
	Model				
2. Number of people wh3. List All Residents living	o will occupy unit g in Unit.				
Full Name:			Date of Birth		
					
4. Pets Yes / No Pet Nar	me				
Do you receive any type	of assistance (If yes pleas	se list) Yes/No			
	(s) recognizes that Sonon	•		- ·	
Association <mark>. Also you ha</mark>	ve read and understand f	the rules and regula	ations of the commun	ity which can be found on the	
website.					
Applicant's Signature		Dat	Date:		
	ture				
0		Date			