

**SOUTHERN OAKS OF PASCO HOMEOWNERS ASSOCIATION, INC.
PROPERTY RENTAL INFORMATION FORM**

LEASED PROPERTY ADDRESS: _____

Owner's Name(s): _____ Current Home Phone: _____

Owner's Current Address: _____

Owner's E-mail Address (Optional): _____

Tenant's Name(s) (List all occupants and their approximate ages):

Tenant's Telephone Number: _____

Tenant's Vehicle(s) (List make and model for each vehicle to be kept at the Leased Lot):

Term of Lease: _____

Commencement Date and Termination Date of Lease: _____

Pets Allowed Pursuant to Lease: Yes _____ No _____

Number of Pets Allowed: _____ Type of Pets Allowed: _____

The undersigned Owner hereby certifies that he/she has explained to the above-referenced Tenant that the subject property is part of a deed restricted community and that the Tenant and all occupants of the subject property are subject to the Governing Documents of the Southern Oaks of Pasco Homeowners Association, Inc. The undersigned Owner also hereby certifies that he/she has provided the Tenant with a copy of the Declaration of Covenants, Conditions and Restrictions and the Community Standards and all amendments thereto.

By: _____
(Print Name)