

Heather Hill I Condominium Assn.  
c/o Ameri-Tech Property Management, Inc.  
24701 US Highway 19 No., Suite 102 ~ Clearwater, FL 33763  
Phone: 727 / 726-8000 ~ Fax: 727 / 723-1101

INTERVIEW REQUIRED

New TENANT:

After approval by the Heather Hill I Board of Directors, immediately send this application to Ameri-Tech Property Management

Address of unit leased: \_\_\_\_\_  
Date of Lease: From: \_\_\_\_\_ To: \_\_\_\_\_  
Owners Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Owners Address: \_\_\_\_\_  
Rental Agent: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax #: \_\_\_\_\_

New Resident Information:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Current address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupy: \_\_\_\_\_ Year Around \_\_\_\_\_ Other

Additional Occupants:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Vehicle Information:

Year \_\_\_\_\_ Make \_\_\_\_\_ Color \_\_\_\_\_ State \_\_\_\_\_ Tag # \_\_\_\_\_  
Year \_\_\_\_\_ Make \_\_\_\_\_ Color \_\_\_\_\_ State \_\_\_\_\_ Tag # \_\_\_\_\_

Pets:

Small bird: \_\_\_\_\_ Fish \_\_\_\_\_ No other pets permitted.

Application is made for approval of the Lease of the above Condominium unit. I/we represent that the information provided is true and consent to further inquiry concerning the information.

Lessee hereby acknowledges that he/she has read and examined the Rules and Regulations of the condominium Association. The undersigned further understands that he/she is directly responsible for any and all actions of family members, guests, employees and agents who are in/on the premises of Heather Hill I Condominium Association. I/we certify that all the information provided on this application is honest and accurate.

Lessees Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Lessees Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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