

Stillwater Crossings Annual Rental Information

Homeowner Name: _____

Homeowners Alternate Address: _____

Stillwater Crossings Property Address: _____

Please complete the following form and include a copy of all required documents/information. This is to be completed **annually** to ensure information is current and compliant.

Contact Information for all Adult Tenants

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Lease – provide a copy of property owner’s coverage (and tenants if applicable)

The lease shall not be less than 12 months (month to month renewals are not allowed).

Lease Starts: _____ Lease Ends: _____

Governing Documents and Rules & Regulations Agreement

The tenants acknowledge receipt of and agree to abide by the Stillwater Crossings Governing Documents (Declaration, Bylaws and Articles of Incorporation) and the Rules and Regulations. Agreement of the tenant to be bound by the terms of such Governing Documents and shall provide that any failure by the tenant to comply with the terms of such documents or rules shall be a default under the lease or rental agreement.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Owners are responsible for the behavior of tenants. Any violation by the tenant will be assessed against the unit owner. Tenant requests for services shall be directed only to the property owner.