

CASAS ADOBES TERRACE



HOMEOWNERS ASSOCIATION

Tenant Information Form

Homeowner (Landlord) Name: _____ Lot #: _____

Homeowner Mailing Address: _____

Homeowner Telephone Number and Email: _____ / _____

Name of Designated Agent (if applicable): _____

Address of Designated Agent: _____

Telephone Number and Email of Designated Agent: _____ / _____

Length of Lease: _____ Beginning Date: _____ End Date: _____

Tenant Name(s): _____

Tenant Telephone Number and Email: _____ / _____

Tenant's Vehicle Information (license to include State of Issue and Number):

No. 1: License: _____ Make / Model: _____ Color: _____

No. 2: License: _____ Make / Model: _____ Color: _____

I (we) at Lot No. _____ attested to by our signatures below, have received, read and agree to abide by the CC&Rs, By-Laws and Rules and Regulations (and as altered or amended) of Casas Adobes Terrace Homeowners Association (CATHOA) knowing that if they are not adhered to, the Homeowner will ultimately be fined or other legal remedy (which may extend to Tenants) for violations in accordance with Arizona Revised Statutes §33-1803 and CATHOA's Violation and Fine Policies and CC&Rs Art IV, Sec 1, Para BB.

Signature of Tenant

Date

Signature of Tenant

Date

Signature of Tenant

Date

Signature of Homeowner (Landlord)

Date

Signature of Designated Agent (if applicable)

Date

I hereby also delegate authority to the above Designated Agent to act on my behalf in dealings with CATHOA regarding this rental property and tenant(s) per ARS 33-1806.01(B) and CATHOA's Rental Policy and Rules(6).

Signature of Homeowner (Landlord)

Date

This form must be completed and returned to CATHOA's Management Company via mail, fax, or email within 15 days from the signing of any lease for any new Tenancy per CATHOA's Rental Policy and Rules

Effective 01/01/2015 (This is the initial version of this form)