

**CHELSEA OAKS TOWNHOMES HOA, INC**  
**A Deed Restricted Community**

**HOA RENTAL REGISTRATION/APPROVAL FORM INSTRUCTIONS**

**All pages of this application must be completed in detail by the applicant(s).**

- If any question is not answered or left blank, this application may be returned, which will result in a delay in processing.
- Application must be signed and dated by the Applicant(s).
- A legible copy of driver license for all persons 18 years and older must be attached.
- All applicants over 18 will have a national background check performed.
- A non-refundable processing fee for the amount of \$100.00 must accompany the application per person over 18 (If married couple, only \$100 is required) **No personal checks accepted. If paying fee online please advise ckelly@ameritechmail.com.**
- Applications can be received by fax or E-mail to: ckelly@ameritechmail.com
- Or mail completed application and payment to:  
**Ameri-Tech Community Management, Inc.**  
24701 US Highway 19 N, Suite 102  
Clearwater FL 33763
- ALLOW 5 - 7 BUSINESS DAYS FOR PROCESSING
- A \$50.00 additional fee can be attached for a rush application.
- Upon approval of a lease or rental, the resident and the owner of the unit agree to provide a copy of the lease or rental agreement to the Association.
- The lease or rental agreement must contain language stating that the tenants rights and occupancy can be revoked by the Association and that the lease is void and terminated at the Associations authority as stated in the Declaration of Covenants and Restrictions upon written notice to the owner or the agent of the owner.
- Failure to provide any of this information prior to allowing occupancy in a unit may result in immediate action from the Association including eviction and/or termination of tenancy.

**It is responsibility of each Unit Owner to comply with the Association leasing procedures and to submit a rental application for approval.**

**CHELSEA OAKS TOWNHOMES HOA, INC**  
**New Tenant Application**

RENTAL APPLICATION – LEASE TERM \_\_\_\_\_ TO \_\_\_\_\_  
Start Date End Date

Rental Unit Address \_\_\_\_\_

Name of current owner(s) \_\_\_\_\_

Permanent address of owner(s) \_\_\_\_\_

Owners Phone \_\_\_\_\_ Cell \_\_\_\_\_

Work Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**APPLICANT'S INFORMATION**

Applicants Name \_\_\_\_\_

SS# \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Applicant's address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

**CO-APPLICANT'S INFORMATION**

Co-applicant's Name \_\_\_\_\_

SS# \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Co-Applicant's address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

**CO-APPLICANT'S INFORMATION**

Co-applicant's Name \_\_\_\_\_

SS# \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Co-Applicant's address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

**PLEASE LIST ALL OCCUPANTS (ADULTS AND CHILDREN WHO WILL RESIDE AT THE RESIDENCE IF APPROVED)**

Name	Relationship to Applicant	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**VEHICLE INFORMATION**

_____	_____	_____	_____	_____	_____
Make	Model	Year	Color	Tag	State
_____	_____	_____	_____	_____	_____
Make	Model	Year	Color	Tag	State
_____	_____	_____	_____	_____	_____
Make	Model	Year	Color	Tag	State

**Resident understands the parking and vehicle restrictions and the Associations rights to enforce by towing any violation thereof.**

**PET INFORMATION** All pets must be registered. A PET REGISTRATION AGREEMENT must accompany this rental application.

There are pet requirements and restrictions on breed, size and type of pets allowed in this community.

No unit may house more than three domestic pets at any time. City and county leash laws apply. Failure to register your pet(s) or comply with the Rules and Restrictions regarding pets in this community will result in the Association taking legal action to have said pet(s) removed permanently from the Community.

Pet type \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_ Name \_\_\_\_\_

Pet type \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_ Name \_\_\_\_\_

Pet type \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_ Name \_\_\_\_\_

**Please provide picture of pet(s) and pet records from veterinarian.**

