SARATOGA BAY HOMEOWNERS ASSOCIATION, INC. PO Box 222486 West Palm Beach, Fl. 33422

APPLICATION FOR CERTIFICATE OF APPROVAL OF LEASE

\$100.00 Application Fee Required

Date	e:	_ Lot:		
Add	dress:			
INF Please print clea	FORMATION CONCE	RNING APPLICANT		
Name:	Marital Status			
Present Address	s			
Email address:				
Cell Phone#	- c#			
Additional Phor	ne#	(work)		
Driver's License	e No. & State			
Driver's License No. & State				
Do you intend to	o occupy the home?	No. of Children		
Cell Phone#	use's Name:Email address			
	s of children residing in			
Occupants in th	e home other than imn	nediate family:		
Name		Relation:		
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No
No
No
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I (We) fully authorizeInitial		answers and references given.
	neowners Association eviewed on our comm	•
Initial		Initial
0	e requirements of Sai	ed fully executed "Contract to ratoga Bay Homeowners Association
Renters or lessees are	e not allowed to sub-l	lease the property at anytime.
Estimated Lease Date	e:	
PRINT NAME:		DATE:
LESSOR:		
PRINT NAME:		DATE:
TITLE:	L:	DATE:
PRINT NAME.		