

## Kelly Greens Verandas Condominium II Association, Inc.

c/o Coastal Association Services, LLC. 1314 Cape Coral Pkwy East, Suite 205 Cape Coral, Florida 33904 T: 239-689-3080 // F: 1-844-273-1058 // Email: info@coastalassociation.biz

## Occupancy/Lease Form

Occupancy form is required for ALL changes of occupants: family, guest(s) (non-renters), visitor(s) (non-renters) and renters/lessees that will occupy a unit in owner's absence. For Leases, submit this notice AND a copy of the Executed Lease Agreement to the Association. NOTE: Minimum lease period is 30 days; no short-term rentals.

Property Address:		_		
Owner(s) Name:	Owners Cell # ()			
Owner Signature:	Date:			
Owner Signature:	Date:			
OCCUPANT(S) INFORMATION:				
Occupancy/Lease Dates: to				
Family Member/Guest/Visitor (in your absence) Tenant/Lessee				
Total Number of Occupants to Occupy Unit:				
Occupant #1 Name:				
Occupant #1 Cell #: ()				
Occupant #1 Email:				
Occupant #2 Name:				
Occupant #2 Cell #: ( ) -				

ADDITIONAL OCCUPANTS:					
Name:	Relationsh	_ Relationship:		_	
Name:	Relationsh	Relationship:		_	
Name:	Relationsh	ip:	Age:	_	
Name:	Relationsh	_ Relationship:		Age:	
VEHICLE INFORMATION:					
Year Make	Model	Color	Plate #	State	
Year Make	Model	Color	Plate #	State	
Year Make	Model	Color	Plate #	State	
•	nd understand the Governing				
	to honor and abide by al			-	
	s Verandas II Condominium		CONPLETE docum	ents can be found online	<u>: at</u> :
	g communices rus, neny c	cens relandas n			
Occupant/Lessee 1 Signatur	e:		Date:		
Occupant/Lessee 1 Signatur	e:		Date:		