



Miller Dreams II Townhomes Homeowners Association, Inc.

LEASE INFORMATION FORM

Please complete the information below and provide a copy of the signed lease. Further, at the time the signed lease is submitted to the Association's management company, parking decals will be provided.

Owner(s) Name(s): _____

Property Address: _____

Owner(s) Mailing Address: _____

Owner(s) Email Address: _____

Owner(s) Telephone Numbers: _____

Date of Occupancy by Tenant(s): _____

Tenant(s) Name(s): _____

Tenant(s) Email Address: _____

Tenant(s) Telephone Number(s): _____

Description of Pet(s) (Breed, Size, Color, Weight):



Vehicles: There are vehicle restrictions in this community. The Association's Management Company can provide you with this information. Each home has (2) two assigned parking spaces. The vehicle information is required in order to confirm that it is a vehicle which is permitted in the community and if permitted, to provide the two (2) parking decals for the assigned spaces.

Make: _____ Model: _____ Year: _____

Color: _____ Tag #: _____ For Office
use Only
Decal # _____

Make: _____ Model: _____ Year: _____

Color: _____ Tag #: _____ For Office
Use Only
Decal # _____

Emergency Contact Information:

Name: _____

Address: _____

Email Address: _____

Telephone Number(s): _____

Did you receive a copy of the Association's Governing Documents? ____ Yes ____ No.

Signature: _____

Date: _____

Signature: _____

Date: _____