

# EAGLES RESERVE LEASE APPLICATION

*Per the Rules and Regulations of Eagles' Reserve Homeowners' Association, Inc., the following tenant questionnaire must be fully completed and submitted along with a copy of a written lease agreement at least five (5) days prior to the commencement of the lease term.*

*All owners and tenants, occupants and guests are governed by and must comply with the governing documents of the Association; the Owner is responsible for providing a copy of the Association's Declaration and Rules and Regulations to the Tenant(s). They are also available on our website at eaglesreserve.info.*

FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
OWNER TENANT

RENTAL ADDRESS: \_\_\_\_\_

LEASE COMMENCEMENT DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

## CRIMINAL HISTORY

Have the Proposed Tenant **or any other person who will be occupying the unit** ever been convicted or had an adjudication of guilt withheld of a felony crime or a misdemeanor crime? Yes \_\_\_\_\_ No \_\_\_\_\_.

If the answer is yes complete the following questions:

- Name of person committing the felony or misdemeanor: \_\_\_\_\_
- County and State where convicted or had adjudication withheld? \_\_\_\_\_
- Date of conviction or withheld adjudication? \_\_\_\_\_
- What was the crime(s)? \_\_\_\_\_

Tenant(s) represent the following information is true and correct, and consents to your further inquiry and investigation concerning information or any information that comes from that inquiry that may become necessary to process this request. **Criminal background checks are done on all applicants. Please sign space below to grant permission.**

SIGNATURE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

**Vehicles:** List all vehicles you or any occupants own or lease.

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag: \_\_\_\_\_

*Per the Rules and Regulations for Eagles' Reserve, any leased Dwelling Unit may be used only as a Single Family Residence; the maximum number of residents in any Dwelling Unit is 5 residents for a 2-bedroom Unit, and 7 residents for a 3-bedroom Unit.*

Other occupants' names and ages and relationship and driver's license # if applicable:

---

---

---

---

---

Total Occupants: \_\_\_\_\_

Real Estate Agent (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Owner's Permanent Address: \_\_\_\_\_

Owner's Phone: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

Owner's Email Address: \_\_\_\_\_

Owner's Emergency Local Contact (Name/Address/Telephone)

---

---

Owner agrees to cooperate with the Association to ensure that the tenant(s) adhere to all rules and regulations, by-laws, etc. which are available at [Eaglesreserve.info](http://Eaglesreserve.info).

\_\_\_\_\_  
Owner Tenant

\_\_\_\_\_  
Owner Tenant

**RETURN COMPLETED APPLICATION AND COPY OF LEASE TO:  
AMERI-TECH COMMUNITY MANAGEMENT  
24701 US HWY 19 NORTH, SUITE 102  
CLEARWATER, FL 33763**

**Date Received:** \_\_\_\_\_ **Background: (Y)** \_\_\_\_\_ **(N)** \_\_\_\_\_

**Approved** \_\_\_\_\_ **Sent to Board** \_\_\_\_\_ **Date** \_\_\_\_\_