

CASA DEL SOL CONDOMINIUM ASSOCIATION, INC.
APPLICATION FOR LEASE

Casa Del Sol Address _____ Unit Phone No. _____

Agent/Realtor's Office _____ Phone No. _____

Lease Period From _____ To _____ LEASE PERIOD: MINIMUM OF Three (3) MONTHS

Unit Owner's Name _____ Phone No. _____

Applicant/Tenant Name _____ Social Security No. _____

*Non-married co-applicants must file separate applications.

Present Address _____ Phone No. _____

Lease ____ Own ____ How long did you live there? _____

Present Employer : _____ Phone No. _____

Position _____

List anyone other than your spouse or children listed below, who will reside with you?

Spouse _____ Employer & Phone No: _____

Name(s) and Age(s) of Children : _____

In case of emergency notify : _____ Phone No. _____

Relationship : _____

**YOU MAY NOT PARK RECREATIONAL VEHICLES, BOATS, CAMPERS, TRAILERS, MOTORCYCLES
OR COMMERCIAL TRUCKS ON CASA DEL SOL PROPERTY.**

Driver's License No. _____ State ____ Vehicle Yr./Make Model: _____

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Personal Reference (1): Name _____ Phone No. _____

Personal Reference (2): Name _____ Phone No. _____