

Gardens of Gulf Cove Property Owners Association, Inc.

PROPERTY OWNER ASSIGNMENT OF RIGHTS TO TENANT

Owner or Owner's agent - please fill this out completely and clearly!

Renters, Tenants and Guests may NOT have Pets as per Article 7.20 of the Second Amended and Restated Declaration of Covenants & Restrictions for the Gardens of Gulf Cove POA, Inc.

Property Owner's Name(s): _____

Gardens Address: _____

E-mail Address: _____ Phone #: _____

Mailing Address: _____

Seasonal Phone #: _____ Emergency Contact Phone #: _____

Tenant / Guest occupied: Yes _____ - _____
Lease / Occupancy start date Lease / Occupancy end date

Total Number of occupants: _____
(Adults) (Children)

Tenant - Responsible Occupant (please print) *Date of birth*

Additional Occupant - Name & relation to responsible occupant(s) *Date of birth*

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All tenants & guests are required to be registered with the Gardens of Gulf Cove Property Owners' Association office. In accordance with Florida Statute 720, it is the responsibility of each Property Owner to update this information with the Association business office **as often as circumstances require**.

In keeping with the Bylaws, the Covenants & Restrictions, and the Rules & Regulations of the Gardens of Gulf Cove and insurance regulations, please fill out this form completely and return it prior to guest/tenant check-in. This information is required to insure only residents (and their authorized guests) use the amenities. If the Association office does not have current information on file, your guest/tenant will not be permitted use of the amenities.

SIGNATURE OF PROPERTY OWNER

DATE

RENTAL AGENT'S NAME & PHONE # if applicable (please print clearly)

RENTAL AGENT'S E-MAIL