

VILLAGES AT STONEBRIDGE

TENANT REGISTRATION FORM

Lot Number: _____ Owner
Name(s): _____

Home
Address: _____

Rental Agency Information:

Name Of Agency: _____ Name of
Agent: _____

List Telephone Numbers, including after hours emergency numbers:

_____ Mark here if you SELF manage the home and provide the best 24/7 telephone numbers to
reach
you: _____

Tenant Information:

Name(s) of all Adults occupying the
home: _____

Lease Begins: ____/____/____ Lease Ends: ____/____/____

Description and License Plate Number of Occupant's Vehicles:

PLEASE MAKE SURE YOU HAVE PROVIDED THE OCCPANTS WITH:

- COPY OF CC&R's and Rules & Regulations
- INFORMATION REGARDING PET RULES & LEASH REQUIREMENTS
- MAIL BOX INFORMATION, GATE REMOTE, AND GATE CODE
- EXPLANATION OF THE PARKING RULES PER PAGE 35 & 36 OF THE CC&R'S

Owner Signature: _____ Rental Agent
Signature: _____

Return this form to:

Amy Telnes Management Services
Mail: 2563 N. Kiowa Blvd., Lake Havasu City, AZ 86403
Fax: (928) 505-1120 Email: amytelnes@frontiernet.net