

LAKWOOD ON THE GREEN PROPERTY ASSOCIATION, INC.
SCREENING APPLICATION

PET REGISTRATION FORM

OWNER: _____ **UNIT** _____

ADDRESS: _____

PHONE: _____

BREED OF DOG: _____

APPROXIMATE WEIGHT WHEN FULL GROWN _____

COLOR: _____ **TAG #:** _____

VETEINATRIANS NAME: _____ **PHONE** _____

I UNDERSTAND THAT ANY FALSIFICATION OF INFORMATION OR FAILURE TO REGISTER MY DOG MAY RESULT IN THE DENIAL OF APPROVAL BY THE BOARD.

I AM FULLY RESPONSIBLE FOR THE ACTION OF MY DOG(S) AND UNDERSTAND THE HOA DOCUMENTS AND RULES AND REGULATIONS REGARDING THE CONTROL OF MY PET(S):

I FURTHER AGREE TO HOLD HARMLESS THE ASSOCIATION AND TO REIMBURSE THE ASSOCIATION FOR ALL ATTORNEY FEES AND COURT COST AS A RESULT OF ANY INJURY OR DAMAGE CAUSED BY MY DOG(S) RESULTING IN THE ASSOCIATION BEING NAMED IN ANY LEGAL ACTION AS A RESULT OF THE ACTIONS OF MY DOG(S).

I FURTHER AGREE TO ALWAYS HAVE MY DOG(S) ON A LEACH WHEN OUTSIDE OF MY UNIT. I ALSO AGREE TO PICKUP AFTER MY DOG(S) AND TO DISPOSE MY DOG'S WASTE IN MY TRASH CAN AND NOT THE TRASH CAN OF OTHER UNIT OWNERS OR TO USE THE DUMPSTER BELONG TO THE CONDOS FOR THIS PURPOSE.

PET OWNERS SIGNATURE _____

PET OWNERS PRINTED NAME _____

ALL INFORAMTION MUST BE SUPPLIED IN ORDER TO PROCESS APPLICATION. FEE IS \$150.00 PAID IN ADVANCE

LAKWOOD ON THE GREEN PROPERTY ASSOCIATION, INC.
SCREENING APPLICATION

PROPERTY SUMMARY SHEET

Current Owner Name: _____
Tenant Name: _____
Unit Address _____
Owner Home Phone _____ Work Phone _____
Owner Email: _____

OWNER MAILING ADDRESS:

Owner Address _____
City _____ State _____ Zip Code _____
Home Phone _____ Work Phone _____
Email: _____

OWNER EMERGENCY CONTACT:

Name: _____
Home Phone _____ Work Phone _____
Email: _____

TENANT DESCRIPTION OF VEHICLES:

Year _____ Make _____ Model _____
Color _____ Tag _____ ST _____ VIN _____

Year _____ Make _____ Model _____
Color _____ Tag _____ ST _____ VIN _____

Year _____ Make _____ Model _____
Color _____ Tag _____ ST _____ VIN _____

MEMBERS OF FAMILY RESIDING IN HOME:

Signed by : _____
Date ____/____/_____

Signed by: _____
Date ____/____/_____

*****NO ONE MAY MOVE INTO ANY UNIT PRIOR TO BEING
SCREENED, REGARDLESS OF WHO LIVES IN THE UNIT, ALL PERSONS
LIVING IN UNIT MUST BE INCLUDED ON THIS FORM. *****

ALL INFORMATION MUST BE SUPPLIED IN ORDER TO PROCESS APPLICATION.
FEE IS \$150.00 PAID IN ADVANCE

LAKWOOD ON THE GREEN PROPERTY ASSOCIATION, INC.
SCREENING APPLICATION

RULES AND REGULATIONS

AFFIDAVIT

Lease From _____
(CURRENT OWNER)

Lease To _____
(PROSPECTIVE TENANT)

I, We, the undersigned, have received a copy of the RULES AND REGULATIONS that have been promulgated from the time of the recording of these documents and have made myself familiar with them.

Signature of Affiant

Signature of Affiant

**ALL INFORMATION MUST BE SUPPLIED IN ORDER TO PROCESS APPLICATION.
FEE IS \$150.00 PAID IN ADVANCE**