

Greenview at Dover Community Association

TENANT APPLICATION TO OCCUPY

this form must be filled out by any tenant who will be renting any home in Greenview

Date: _____ Start Date of Lease: _____

Background check _____ (date) Credit Check _____ (date)

Tenant full name:(print) _____

D.O.B. _____

Greenview Address: _____

Home Phone: _____ Work: _____ Cell _____

Make/Year/Color of Car: _____

Drivers License No. _____ State _____

Previous Address: _____

Dog: _____ YES _____ NO Type of Dog _____

Other Pets: _____

List all other persons to occupy premises:

Name: (print) _____

Make /year/color of car _____

Other Name: _____

Make /year/color car _____

Other Name: _____

Make/ year/color car: _____

Authorization to verify information: Tenant-Applicant represents that the above statements are true and complete and hereby authorize verification of any and all information.

It is the responsibility of the Owner to run credit reports and background checks on all adult occupants. It is prudent for Owner to run checks on roommates as well.

It is also the responsibility of Owner to agree who will maintain yard, with final responsibility of maintenance falling back on the Owner.

Tenant's Signature _____ Date _____

Other Tenant's Signature _____ Date _____

Other Tenant's signature _____ Date _____

Owner Acknowledgment _____ Date _____

Owner's new address _____ city _____

phone _____ cell _____ e-mail _____

Date Received by Board _____