OAKMONT OWNERS ASSOCIATION, INC.

c/o Campbell Property Management 401 Maplewood Dr. – Suite 23, Jupiter, FL 33458 Phone: (561)203-7910 | Fax(561)277-2481

<u>LEASE INFORMATION SHEET & ACKNOWLEDGEMENT FORM</u> (PLEASE PRINT LEGIBLY)

The Oakmont community welcomes new members! We would like to get to know you! Please complete the questionnaire below. Should you need any assistance please contact our Property Manager, Kelly Ochs of Campbell Property Management at 561-203-7910 or via email at oakmont@campbellproperty.com

Date:		
Please indicate terms of lease (months) :	Lease starts:	and ends:
PROPERTY OWNER NAME & ADDRESS:		
The prospective buyer(s) must complete the fo	llowing:	
Name (Last):		(MI):
Date of Birth:Telephone No.:	Alt. Tele	ephone No.:
Email Address:		
Spouse's Name (Last):	(First):	(MI):
Name(s) of Children:	DOB:	
	DOB:	
	DOB:	

If there are any other adult occupants of the property, please complete a separate form.

Present Address:			
VEHICLE INFORMATION:			
Sands community. It is the purchase	r's responsibility to unders	es of vehicles and parking inside the Mariner stand and abide by the governing documents of sociation in addition to any restrictions that may	
Automobile Make:	Model:		
License #:	State:		
Second Auto Make:	Model:	_ Year: _	
License #:	State:		
PERSONS TO NOTIFY IN CASE OF	EMERGENCY		
1	Tel #:		
2	Tel #:		
By signing this information and acknowledge the Community. Lessee(s) Signature(s)	owledgement form, I am a	agreeing to abide by all Rules and Regulations o	

PLEASE COMPLETE THIS INFORMATION & ACKNOWLEDGEMENT FORM. THIS FORM AND A COPY OF THE LEASE AGREEMENT MUST BE SUBMITTED TO CAMPBELL PROPERTY MANAGEMENT. THE DOCUMENTS MAY BE MAILED, EMAILED TO <u>OAKMONT@CAMPBELLPROPERTY.COM</u>, FAXED OR HAND DELIVERED TO AT THE ABOVE ADDRESS.