

Millcreek Springs Homeowners Association Lease Form

Note: This form and a copy of the Lease must be received within 30 days of renting / leasing the unit to avoid a \$150 fine.

HOMEOWNER(S)

Unit# / Lot# _____ Name(s) _____

Billing Address: _____
Phone Number(s): _____
Email Address: _____

PROPERTY MANAGER (if applicable)

Name: _____
Address: _____
Phone Number: _____ Contact: _____
Email Address: _____

TENANT(S)

Name(s) & Ages of each tenant: _____

Phone Number(s) _____
Email Address: _____
Beginning Date of Lease: _____ Ending Date of Lease: _____
License Plate# of all vehicles: _____

HOMEOWNER ACKNOWLEDGMENT

As the Owner(s) of the Unit or Lot referenced above, I/We understand that I/We am/are responsible for all actions of our Tenants and their Guests, and that it is my/our responsibility to provide them with copies of, and inform them of all governing documents of the Association (CC&Rs, Bylaws, Rules & Regulations, etc.)

Signed: _____ **Date:** _____
Signed: _____ **Date:** _____

TENANT ACKNOWLEDGMENT

As the Tenant(s) of the Unit or Lot referenced above, I/We have been given a copy of the CC&Rs and Rules & Regulations for the Millcreek Springs Homeowners Association, and I/We agree to abide by them. I/We further understand that I/We am/are subject to being evicted if the rules are not followed.

Signed: _____ **Date:** _____
Signed: _____ **Date:** _____

_____ **Copy of Signed Lease attached.**