



LEISURE VILLAGE ASSOCIATION, INC.

LEASING LEISURE VILLAGE PROPERTY Lease Extension (Month to Month)

The undersigned owner(s) will be leasing their home at _____ for:

- A minimum of 30 days (or month-to-month) _____ to _____.
- For an extended period of time. From _____ to _____.

Tenants Name:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Owners Signature:

- 1) _____
- 2) _____

Leisure Village Association (LVA) Association Information Form (AIF) – Tenant

Please use this form to update yours and your spouse's information only. Addition tenants need their own form.

Place a line through areas you do not wish to have changed from previous forms. Failure to do so will result in blank fields on this document being removed from your account. All persons listed must be on a lease or other document provided by the owner as having permission to reside in the home.

Unit Address: _____
(Unit to be updated)

TENANT NAMES (Max 2 per form. Additional tenants or non-spouses need to fill out their own form)

First: _____ **Last:** _____ **Date of Birth:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____ **Email:** _____

First: _____ **Last:** _____ **Date of Birth:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____ **Email:** _____

PRIMARY MAILING ADDRESS check here if same as LVA Unit Address above.

Street Address: _____ **Unit#:** _____

City: _____ **State:** _____ **Zip Code:** _____

PERSONS TO BE NOTIFIED IN AN EMERGENCY (Legal Representative, POA, ect.)

(They will have access to your property if you are incapacitated or other extended absence, contact the Association office for further information)

1. **First:** _____ **Last:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____ **Email:** _____

Street Address: _____ **Unit#:** _____

City: _____ **State:** _____ **Zip Code:** _____

2. **First:** _____ **Last:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____ **Email:** _____

Street Address: _____ **Unit#:** _____

City: _____ **State:** _____ **Zip Code:** _____

SIGNED: _____

PRINT NAME: _____

Date: _____