



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 INFORMATION FORM ("AIF")

NEW MOVE IN _____
UPDATE _____
PHONE UPDATE _____

A. LEISURE VILLAGE ADDRESS:

1. _____ RESIDENCE PHONE: _____
CELL NUMBER: _____ CELL NUMBER: _____

GATE: INPUT ALL NUMBERS LISTED ABOVE.

B. IS THIS RESIDENCE LEASED? YES NO ORIG RENEWAL LEASE DATE _____ THRU _____

C. LEGAL OWNER(S) (as on title) MAILING ADDRESS TELEPHONE
1. _____
2. _____

D. INDIVIDUALS RESIDING AT ABOVE ADDRESS

<u>NAME</u>	<u>DATE OF BIRTH</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

E. LISTING FOR TELEPHONE DIRECTORY AND SECURE WEBSITE: I/WE WISH TO BE UNLISTED

NAME: _____ PHONE NUMBER _____
NAME: _____ PHONE NUMBER _____

ONLY TWO PHONE NUMBERS WILL BE LISTED IN THE PHONE DIRECTORY AND ON THE WEBSITE.
IF INSTRUCTIONS IN THIS SECTION ARE NOT CLEAR YOU WILL NOT BE LISTED – THANK YOU!

(Select one box or both) EMAIL ADDRESSES FOR LV OFFICE ONLY FOR RESIDENT EMAIL DIRECTORY

1. _____
2. _____

THE FOLLOWING INFORMATION IS OPTIONAL

F. PERSONS TO BE NOTIFIED IN AN EMERGENCY (FAMILY MEMBER OR LVA FRIEND OR NEIGHBOR)

<u>NAME</u>	<u>ADDRESS</u>	<u>RELATIONSHIP</u>
1. _____	_____	_____
CELL PHONE _____	HOME PHONE _____	
<u>NAME</u>	<u>ADDRESS</u>	<u>RELATIONSHIP</u>
2. _____	_____	_____
CELL PHONE _____	HOME PHONE _____	

G. PETS: TYPE _____ NAME _____ TYPE _____ NAME _____

SIGNED: _____ PRINT NAME _____