HERITAGE LAKES CONDOMINIUM ASSOCIATION 5503 - 67TH Ave. N. \$100.00 Application Fee

(Background check fee included) **NOTIFICATION OF SALES**

This notification should be completed at least seven (7) business days prior to closing date.

Ameri-Tech Property Management, Inc.

Send to:

	St Peters	Avenue South sburg, Fl 33707 727)726-8000		3-7307		
Date		_ Ur	nit#			
Closing D	Oate:					
Buyer(s) Na	ame:					
	-					
Buyer's em	ail address: _			Local pl	hone #:	
Occupancy unit are as j	is limited to follows:	two (2) persons	per bedroom. I	Names of perso	ons who will oc	cupy the
Name			Name			
Name			Name			
Name			Name			
Name			Name			
Vehicle 1	<u>Year</u>	<u>Make</u>	<u>Color</u>	<u>State</u>	Tag #	
Vehicle 2	Year	Make	Color	State	Tag #	

Vehicles should park in unit's assigned parking spaces

Relationship:	Phone #:
Does the Emergency contact have a ke	ey to your unit? Yes No
	ead the attached Rules and Regulations for Heritage Lakes
roperty. The undersigned further under	onditions of the same as well as all signs posted on the erstands that he/she is directly responsible for all actions on agents who are in/on the Heritage Lakes premises.
roperty. The undersigned further under	erstands that he/she is directly responsible for all actions on agents who are in/on the Heritage Lakes premises.
property. The undersigned further under amily members, guests, employees an	erstands that he/she is directly responsible for all actions on agents who are in/on the Heritage Lakes premises. Date:

DATE		
D111		

CUSTOMER NUMBER 2325 - AMERI-TECH

TENANT INFORMATION FORM

I / We	, prospective
tenant(s) / buyer(s) for the property located at	
Managed By:	Owned By:
Hereby allow TENANT CHECK LLC and or the property owner / manager to i record, to obtain information for use in processing of this application. 1/ we ur an inquiry. 1/ we cannot claim any invasion of privacy or any other claim that	inquire into my / our credit file, criminal, and rental history as well as any other personal
TENANT INFORMATION:	SPOUSE / ROOMMATE:
SINGLE MARRIED	SINGLEMARRIED
SOCIAL SECURITY #:	SOCIAL SECURITY #
FULL NAME;	FULL NAME:
DATE OF BIRTH:	DATE OF BIRTH:
DRIVER LICENSE #:	DRIVER LICENSE #:
CURRENT ADDRESS:	CURRENT ADDRESS:
HOW LONG?	HOW LONG?
LANDLORD & PHONE:	LANDLORD & PHONE:
REVIOUS ADDRESS:	PREVIOUS ADDRESS:
HOW LONG?	HOW LONG?
EMPLOYER:	EMPLOYER:
OCCUPATION;	OCCUPATION:
GROSS MONTHLY INCOME:	GROSS MONTHLY INCOME:
ENGTH OF EMPLOYMENT:	LENGTH OF EMPLOYMENT:
VORK PHONE NUMBER:	WORK PHONE NUMBER:
IAVE YOU EVER BEEN ARRESTED? CIRCLE ONE) YES NO	HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO
IAVE YOU EVER BEEN EVICTED? CIRCLE ONE) YES NO	UAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO
IGNATURE:	SIGNATURE:
HONE NUMBER:	PHONE NUMBER:
MAIL:	EMAIL:
IMPORTANT Please complete this form and return it to Ameri-Tech with your owner/tenant application. Applications received without this form will not be processed.	IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT. A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR
	REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES / MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS