APPLICATION FOR ENTRANCE FOR BUYING OR LEASING

Garden Cove Residents Association Inc.
An Adult Community for Residents Over 55 Years Of Age

THIS APPLICATION MUST BE APPROVED BY THE BOARD BEFORE AN APPLICANT CAN OCCUPY A UNIT.
If buying, please provide the written purchase agreement with application
If leasing, please provide the written lease (if lease is in writing) with application

Check One:

LEASING ___ **B**UYING___ 2nd Occupant (Not Owner): _____

LEASE TERM (30 DAY MINIMUM): From ____ to _____;
Have you previously leased in the park in the last three years? Yes _____No _____
If Yes: Date(s) _____ _____ _____
Park Owner Name(s) _____ _____ _____
Park Owner Address (s)_____ _____ _____

Leasing or Buying fill out below.
Applicant (1) Name_____ **Age**_____
Present Address: _____ # of Years _____
Own _____ Rent _____ If You Rent (Landlord's Name): _____
Landlord Phone: _____
Applicant Phone Number: _____ Email_____
Present Employer: Retired_____ OR Position: _____ # of Years Employed there_____
Employer Address: _____ Employer Phone: _____

Attach a copy of the drivers license or photo ID for each applicant.

Applicant (2) Name_____ **Age**_____
Present Address: _____# of Years _____ Own ___
Rent _____
Applicant Phone Number: _____ Email_____
Present Employer: Retired_____ OR Position: _____ # of Years Employed there_____
Employer Address: _____ Employer Phone: _____

Attach a copy of the drivers license or photo ID for each applicant.

List Two Personal References:

Name:_____ Phone:
Address: _____

Name: _____ Phone:_____
Address: _____

In Case Of Emergency:
Name: _____ Cell Phone: _____ Other Phone:
Address: _____
Email_____