

Fishhawk Ridge Association INC.
C/O Terra Management Services, LLC
14914 Winding Creek Court, Tampa, FL 33613
Ph: (813) 374-2363 Fx: (813) 374-2362
fishhawkridge@myterracomunity.com

Each form must be completed in its entirety and signed by all applicable parties. If missing documents are not received within (7) business days, the pending application will be automatically denied.

- Application with all fields completed and signed by applicant(s)**
- A fully executed copy of the lease contract**
- Copy of Homeowners Insurance Policy (HO3 OR DP3)**
- Applicant(s) agree(s) to pay \$250 for a non-refundable application processing fee.**
- Applicant(s) agree(s) to pay a background check fee of \$50 for each additional person over 18.**
- Photo ID for each applicant over 18.**

All applicable fees are payable to Fishhawk Ridge Association, Inc

**(Money order or cashier's check only)
(Personal checks are not acceptable)**

**Mail or drop off complete packet to:
Fishhawk Ridge Association, Inc
c/o Terra Management Services
14914 Winding Creek Court
Tampa, FL 33613**

Please note all owner accounts must be current prior to submitting a lease application.

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Property Address: _____
Current Owner(s)/Landlord: _____
Owner Email: _____
Property Management Company/Agent: _____
Property Management Email/Phone: _____
Term of Lease (No less than 7 months): ____ / ____ / ____ to ____ / ____ / ____
Planned Move-in Date: ____ / ____ / ____

Applicant Name: _____
Social Security Number: _____
Date of Birth: _____
Current Address: _____

Home Phone: _____
Cell Phone: _____
Current Employer: _____
Employed for how long: _____
Work Phone/Employer Phone: _____
Driver's License#/US Photo ID #: _____
State License/ID Issued in: _____

Co-Applicant Name: _____
Social Security Number: _____
Date of Birth: _____
Current Address: _____

Home Phone: _____
Cell Phone: _____
Current Employer: _____
Employed for how long: _____
Work Phone/Employer Phone: _____
Driver's License#/US Photo ID #: _____
State License/ID Issued in: _____

Additional Occupants(any occupant 18+ must provide SSN#):

- 1) Name: _____ DOB: _____
Relationship _____ Social Security #: _____
- 2) Name: _____ DOB: _____
Relationship _____ Social Security #: _____
- 3) Name: _____ DOB: _____
Relationship _____ Social Security #: _____

Vehicle Registration:

- 1) Make/Model/Color: _____ Year ____ Tag# _____ State _____
- 2) Make/Model/Color: _____ Year ____ Tag# _____ State _____

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Pet Information (NO DOGS OVER 25 POUNDS;(2) Pets Maximum):

Pet's Name: _____ Type of Pet :(dog, cat, etc)_____:

Breed & Color: _____ Weight:_____

Identification Tags: Yes or No? Tag #:_____

Pet's Name: _____ Type of Pet :(dog, cat, etc)_____:

Breed & Color: _____ Weight:_____

Identification Tags: Yes or No? Tag #:_____

Is any occupant a member of the United States Armed Forces: Yes or No?

Duty Status:_____

(*If so, please identify all occupants, Branch of the Armed Forces in which they serve and the status of such service member (example: active duty, Reserves, National Guard, deployed).)

Service member name:_____

Branch:_____

ACKNOWLEDGEMENT OF RECEIPT OF RULES AND REGULATIONSOWNER

states that he/she has received a copy of the condominium documents, including the Declaration of Condominium, the Articles of Incorporation, By-laws and Rules and Regulations and that he/she has read these documents, understands their content, and agrees to abide by all the conditions and terms therein, and all reasonable rules and regulations enacted thereafter officially by the Association.

Owner (Signature)_____ Date_____

Owner(Signature)_____ Date_____

RENTER states that he/she has received a copy of the Association's Rules and Regulations and that he/she has read these documents, understands their content, and agrees to abide by all of the conditions and terms therein, and all reasonable future rules and regulations officially enacted by the Association.

Renter (Signature)_____ Date_____

Renter (Signature)_____ Date_____

APPLICANT DISCLOSURE AGREEMENT: Applicant(s) represents that the information provided herein is true and correct and hereby consents and authorizes, by signature, the release of public records, credit report, employment verification, rental, or lease information, whether by fax, verbal, photocopy or original signature, to the Association's Board of Directors or its agent now or in the future

Applicant(Signature)_____ Date_____

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