

EXHIBIT "A"
PARCRESTON CONDOMINIUM UNIT OWNERS ASSOCIATION

LEASE REGISTRATION FORM

Unit Address: _____

Unit Owner Information:

- 1. _____
Last Name First Name Daytime Phone Evening Phone

- 2. _____
Last Name First Name Daytime Phone Evening Phone

- 3. _____
Last Name First Name Daytime Phone Evening Phone

Unit Owner's Mailing address:

Unit Owner's E-Mail: _____

Term of the Lease: _____

Tenant Information: (Print names of tenants on lease and contact information)

Name	Daytime Phone	Evening Phone	Email

Resident Information:

Print the names of all other persons who will reside in Unit:

Key FOB: 1. _____ 2. _____

Pet Information – Pets not to exceed one (1) dog or two (2) cats, and up to three (3) caged birds per unit.

	Pet (1)	Pet (2)
Type:	_____	_____
Breed:	_____	_____
Color:	_____	_____
Name:	_____	_____
Age:	_____	_____
Weight:	_____	_____

Tenant Motor Vehicles:

_____	_____
(Make and Model)	(State License Plate No.)
_____	_____
(Make and Model)	(State License Plate No.)

Tenant's Representations:

By my/our signature(s) below, I/we affirm that I/we acknowledge receipt of the Declaration, Bylaws, and Policy Resolutions and agree to abide by them. The representations made are true and complete.

Tenant's Signature: _____ Date: _____

Tenant's Signature: _____ Date: _____

Unit Owner's Representations:

By my/our signature(s) below, I/we affirm the following:

I/we represent that we have provided the tenants with the Declaration, Bylaws, and Policy Resolutions.

The representations made are true and correct.

Unit Owner's Signature: _____ Date: _____

Unit Owner's Signature: _____ Date: _____