

STONEHEDGE ON THE HILL

A 55 and older RESIDENT OWNED COMMUNITY
39820 US 19 NORTH TARPON SPRINGS, FL. 34689
(727)934-7917 Fax (727)942-4976

Rental Approval Form

pg 1 of 2

(\$50 check payable to SRI for background check)

OWNER INFORMATION:

UNIT # _____

Date: _____

Name(s) _____

Address: _____

City, State, Zip: _____

Telephone: _____

RENTERS INFORMATION:

Name(s): _____

Address: _____

City, State, Zip: _____

Telephone: _____

Rental Term: (3 month minimum)

Expected Arrival Date: _____

Expected Departure Date: _____

We understand that it is our responsibility to check into the office upon arrival and check out upon departure within a day or 2 of each

We understand that our rental agreement is with the owner and the owner is ultimately responsible for our actions within the park, although that does not release us from our responsibility of abiding by the Rules and Regulations of the Park during our stay.

Initial: _____

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Renter(s): _____

of cars _____ Plate #: _____ 2nd car Plate # : _____

I/We have _____ have not _____ rented in Stonehedge prior to this year. If yes, unit# _____

How did you learn about Stonehedge ? _____

Local Emergency contact:

Name: _____ Phone#: _____

Additional emergency or other information:

_____ Provided with a North Gate opener (Gate clicker) by the owner

_____ Provided with a copy of the Rules and regulations

_____ Provided copy of Drivers license (proof of age) to the office

We fully understand that EVERYONE has to be over 55 to reside in Stonehedge for more than 30 days
We fully understand and will abide by the Rules and Regulations of Stonehedge Residents

Renters Signature(s) : _____

Interview signature: _____

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Welcome to the Neighborhood all Guests and Renters

We, the Board of Directors and Management at Stonehedge, would like to thank you for choosing Stonehedge for your vacation or rental stay.

Please make note of some of the rules and regulations to follow while you enjoy your stay at Stonehedge.

A full set of the Rules and Regulations should be made available to you by the owner

- Trash pickup is on Mondays- --Recycle pickup is on Thursdays
 - ONLY recycle bins may be put out the night before
 - NO trash pails allowed out- trash must be in bags and put out the day of collection
- Children under 16 not permitted unsupervised in any recreational areas of the Park (other than Basketball court)
- Pool hours –dawn to dusk – Please obey ALL posted pool rules
 - NO running or diving---NO SMOKING
 - Please eat in designated areas- NO glass of any kind in pool area
 - Cover-ups (shirt, wrap and footwear) must be worn outside of pool area at all times
- No drying racks allowed in carport- drying clothes must be on an umbrella clothes rack in the back of the unit and the rack must not be left up or out overnight
- DO NOT HANG clothes off chairs, stair railings, etc.
- VISITING dogs to non-dog lots MUST give office minimum 10 days' written notice.
- Dogs must always be on a leash and are NOT permitted to be walked on common grounds at any time (pets may only be walked on the unit owners' grounds), SEE Rules and Regulations booklet for full set of dog rules
- Overflow parking-Please park in the street with all tires off the sidewalk and yard area
- For Safety-Please make sure bicycles and skateboarders obey the rules of the road
- For Safety-Park SPEED LIMIT 15 MPH- OBEY IT!

If you have any questions about park operations or other guidelines not mentioned in this introduction, please feel free to call the office at 727-934-7917

Office hours: M-W-F 7:00 AM-3:30 PM and Tues-Th 7:00 AM – 12 Noon

Thank you for your cooperation and enjoy your stay at Stonehedge

From your Board of Directors and Management Co.

PROPERTY / ASSOCIATION - _____

BACKGROUND INFORMATION FORM

DATE: _____

I / We _____, prospective tenant(s) / buyer(s) for the property located at

Managed By: _____ Owned By: _____

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / we understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I / we cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

INFORMATION:

SINGLE _____ MARRIED _____

SOCIAL SECURITY #: _____

FULL NAME: _____

DATE OF BIRTH: _____

DRIVER LICENSE #: _____

CURRENT ADDRESS: _____

HOW LONG? _____

LANDLORD & PHONE: _____

PREVIOUS ADDRESS: _____

HOW LONG? _____

EMPLOYER: _____

OCCUPATION: _____

GROSS MONTHLY INCOME: _____

LENGTH OF EMPLOYMENT: _____

WORK PHONE NUMBER: _____

HAVE YOU EVER BEEN ARRESTED?
(CIRCLE ONE) YES NO

HAVE YOU EVER BEEN EVICTED?
(CIRCLE ONE) YES NO

SIGNATURE: _____

PHONE NUMBER: _____

SPOUSE / ROOMMATE:

SINGLE _____ MARRIED _____

SOCIAL SECURITY #: _____

FULL NAME: _____

DATE OF BIRTH: _____

DRIVER LICENSE #: _____

CURRENT ADDRESS: _____

HOW LONG? _____

LANDLORD & PHONE: _____

PREVIOUS ADDRESS: _____

HOW LONG? _____

EMPLOYER: _____

OCCUPATION: _____

GROSS MONTHLY INCOME: _____

LENGTH OF EMPLOYMENT: _____

WORK PHONE NUMBER: _____

HAVE YOU EVER BEEN ARRESTED?
(CIRCLE ONE) YES NO

HAVE YOU EVER BEEN EVICTED?
(CIRCLE ONE) YES NO

SIGNATURE: _____

PHONE NUMBER: _____

TENANT CHECK HOURS OF OPERATION:
MONDAY - FRIDAY : 9:00 a.m. - 5:30 p.m.
SATURDAY : 11:00 a.m. - 4:00p.m.
ALL ORDERS RECEIVED AFTER 5:00 p.m. (3:30 p.m. on Sat.) WILL BE PROCESSED THE NEXT BUSINESS DAY

TENANT CHECK FAX #: (727) 942-6843

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