

KINGS COVE CONDOMINIUM

REQUEST TO RENT FORM

NAME _____

RENTAL ADDRESS _____

OWNER ADDRESS _____

OWNER PHONE # _____

PROPOSED START DATE OF LEASE _____

PROPOSED DURATION/ END DATE OF LEASE (MUST BE AT LEAST ONE YEAR) _____

OWNER PURCHASE DATE _____

OWNER MOVE-IN DATE _____

I certify that I have read and will comply with all provisions of the King's Cove By-laws relating to rental of my unit (especially Article XI – Sections 1 and 2).

I certify that I will provide a complete copy of the King's Cove By-laws to the renter of my unit, and will include in the lease the requirement that renter-residents comply with all applicable By-laws, rules and regulations while residing in King's Cove.

I certify that the rental is for residential purposes.

I will provide an exact copy of the lease for review PRIOR to occupancy by renter. I will also provide future extensions of lease to the same renter before the end of the existing lease. Before offering a lease to a different renter I will submit another Request to Rent form.

Co-owner Signature _____

Management Approval _____

Date _____