



Highland Square Homeowners Association, Inc.

Tenant Registration Form

Rental Property Street Address	Number of Bedrooms
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Name of Property Owner(s)	Email Address
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Owner(s)' Mailing Address	City	State	Zip
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Owner(s)' Primary Phone Number	Alternate Phone Number	Email Address
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Full Name of Tenant	Social Security Number	Date of Birth
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Current Street Address	City	State	Zip
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Full Name of Co-Tenant	Social Security Number	Date of Birth
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Current Street Address	City	State	Zip
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All Additional Occupants (Including Children)
Full Name Date of Birth (MM/DD/YYYY) Social Security Number Relationship to Tenant



Highland Square Homeowners Association, Inc.

Has any prospective occupant (adult or child) been:

Arrested for a misdemeanor or felony? Yes___ No___

Evicted from a rental property? Yes___ No___

Ordered to register as a sex offender or sexual predator? Yes___ No___

If any answer is yes, please identify the individual and explain the circumstances.

Tenant(s)' Vehicles (List all Vehicles):

#1 _____
Color Make Model Tag No.

#2 _____
Color Make Model Tag No.

#3 _____
Color Make Model Tag No.

#4 _____
Color Make Model Tag No.

Note to Prospective Tenants:

Passenger vehicles may be parked in your garage, on the driveway or on the roadway. Parking on any grass area of the property is strictly prohibited. For additional parking restrictions, please see the Community Rules and Regulations or contact your landlord for more information.

Tenant(s)' Pets:

#1 _____
Species (dog, cat, etc.) Color Weight

#2 _____
Species (dog, cat, etc.) Color Weight

#3 _____
Species (dog, cat, etc.) Color Weight

#4 _____
Species (dog, cat, etc.) Color Weight

Acknowledgements and Authorization by Tenant(s)

1. I/We hereby acknowledge that copies of the Association's governing documents and regulations have been made available by the landlord.
2. I/We hereby acknowledge that all occupants of the unit are bound by and obligated to comply with the Association's governing documents and regulations.
3. I/We hereby authorize Highland Square Homeowners Association, Inc. to obtain an investigative consumer report on each adult application for occupancy and to share the report with the owner of the property. The report will be limited to items of information on this registration form. I/We agree that an investigative consumer report is not an invasion of my/our privacy.

Signature of Tenant

Date Signed

Signature of Co-Tenant

Date Signed