

Application Form

To be completed by Owner or Owner's Agent

UNIT OWNER INFORM				Member Number:	
River Strand Address: _					
Home Phone:		Phone Number	to be reached whi	le unit is leased:	
If using an agency: Na	ime, Contact F	Person and Phor	ne Number:		
				or 30 days, whichever is less)	
Starting Date://	Ending Do	ate://		nbership? Yes 🗖 No 🗖 en applicable}, Tennis, Pool and Fitness	Center)
Names of Transferee/L	essee (MUST IN	NCLUDE ALL PERS	Son to reside in h	OME)	
Photo ID required from a	<u>Il transferees</u>				
Cell Phone:		E-Mail Addre	ss:		
Vehicle Information:					
	Make	Model	Tag	State	
• Key contact num • Trash pickup sch I hearby understand that during that time. It is my i period shall not be for less provide this form and a si of this lease. SIGNATURE OF OWNER /M	nbers for commu edule t if I transfer my r intent to transfer ss than one mon igned copy of th AEMBER: EE IS \$200.00 (to a	unity (manageme membership privile my unit's privilege oth, or 30 days, wh he lease agreeme	nt company) eges I will no onger be es to the transferee a ichever is less. Furthe ent to the Association	g, commercial vehicles, pets) e able to exercise those privileg bove. I understand that the tro r, I understgand that I am requi no less than 15 days prior to th ehicle transponder / additional	insfer red to
		to: rerocontion@th	oicontoam com or a	dmin@riverstrandgolf.com	
			enton, FL 34212 Phor	-	
A sign * Failure to comply with	ned copy of the *Membership pr (Please see t n this is a violatic	lease agreement ivileges may only the Delcaration for on of the Declarati	must accompany thi be transferred to one the definition of "far	e family unit*** nily unit") nditions & Restrictions for the Ri	ver
				A DECEMBER OF	

Date Received:_____ Check#:____ Ticket #:___