



Residents' Association

TENANT INFORMATION SHEET

Address of Home to be leased: \_\_\_\_\_

Tenant Name (2) \_\_\_\_\_ Date of Birth \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone \_\_\_\_\_

Telephone \_\_\_\_\_

Email Address 1: \_\_\_\_\_

Email Address 2: \_\_\_\_\_

Do you have children under the age of 18 years residing with you?

\_\_\_\_\_ YES

\_\_\_\_\_ NO

If you checked "Yes" **STOP**. No Children under the age of 18 are permitted to permanently reside in this community. See Declaration Section 38.1

Additional Residents (over the age of 18) \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tenants Signatures: \_\_\_\_\_

\_\_\_\_\_

Return to Campbell Property Management, 11899 Apple Blossom Trail, Port St. Lucie FL 34987. PRIOR TO MOVE IN. ALL LEASES ARE SUBJECT TO THE APPROVAL OF THE VITALIA BOARD OF DIRECTORS, AND APPROVAL MUST BE OBTAINED PRIOR TO MOVE IN.