

**APPLICATION FOR OCCUPANCY
(PLEASE PRINT OR TYPE)**

UNIT: _____ PARKING SPACE: _____ LEASE: _____ PURCHASE: _____

DATE: _____ DESIRED DATE OF OCCUPANCY: _____

NAME: _____ PHONE: _____ EMAIL: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NO: _____

SPOUSE'S NAME: _____ MAIDEN NAME: _____

(If married less than two years)

DATE OF BIRTH: _____ SOCIAL SECURITY NO: _____ EMAIL: _____

NO. OF PERSONS WHO WILL OCCUPY UNIT: _____ ADULTS (OVER AGE 18): _____

NAMES & AGES OF CHILDREN WHO WILL OCCUPY UNIT: _____

NUMBER OF MOTOR VEHICLES: ALL VEHICLES MUST BE REGISTERED

1. Make _____ YEAR: _____ LICENSE PLATE: _____

2. Make _____ YEAR: _____ LICENSE PLATE: _____

3. Make _____ YEAR: _____ LICENSE PLATE: _____

IN CASE OF EMERGENCY NOTIFY: _____

(Name)

(Address)

(Phone)

***** **PART 1 RESIDENCE HISTORY** *****

A. PRESENT ADDRESS: _____ PHONE: _____ HOW LONG _____
(INCLUDE APT OR CONDO NAME)

LANDLORD or MORTGAGE: _____ PHONE: _____
ADDRESS: _____ MTG. NO. _____

B. PRESENT ADDRESS: _____ PHONE: _____ HOW LONG _____
(INCLUDE APT OR CONDO NAME)

LANDLORD or MORTGAGE: _____ PHONE: _____
ADDRESS: _____ MTG. NO. _____

C. PRESENT ADDRESS: _____ PHONE: _____ HOW LONG _____
(INCLUDE APT OR CONDO NAME)

LANDLORD or MORTGAGE: _____ PHONE: _____
ADDRESS: _____ MTG. NO. _____

***** **PART II EMPLOYMENT & BANK REFERENCES** *****

IF RETIRED, LIST FIRM FROM WHICH YOU ARE RETIRED AND PERTINENT DATE

A. EMPLOYED BY: _____ PHONE NO. _____ HOW LONG _____
ADDRESS: _____ POSITION _____

B. SPOUSE'S EMPLOYMENT: _____ PHONE NO. _____ HOW LONG _____
ADDRESS: _____ POSITION _____

C. BANK REFERENCE: _____ PHONE NO. _____ HOW LONG _____

***** PART III CHARACTER REFERENCES *****
(DO NOT LIST RELATIVES)

- 1. NAME: _____ HOW LONG: _____
ADDRESS: _____ PHONE NO: _____

- 2. NAME: _____ HOW LONG: _____
ADDRESS: _____ PHONE NO: _____

- 3. NAME: _____ HOW LONG: _____
ADDRESS: _____ PHONE NO: _____

By signing, the Applicant recognizes that BAYSHORE CLUB MANAGEMENT ASSOCIATION, INC., or its Agents, may investigate the information supplied by the Applicant and a full disclosure of pertinent facts may be made to the BAYSHORE CLUB MANAGEMENT ASSOCIATION, INC.

DATE: _____ SIGNATURE: _____
APPLICANT

DATE: _____ SIGNATURE: _____
APPLICANT'S SPOUSE