

WASHINGTON SQUARE HOMEOWNERS ASSOCIATION, INC. LEASING PERMIT APPLICATION

This Leasing Permit Application ("Application") is made this _____ day of _____, 20____, by _____ ("Owner"), who owns the following Lot within the Washington Square community: _____ (the "Lot"). Owner desires to lease Owner's Lot, and Owner understands that leasing is permitted only if Owner receives a Leasing Permit from the Board of Directors of Washington Square Homeowners Association, Inc. ("Association").

Owner understands that a Leasing Permit will be issued only if the number of current leasing permits plus Grandfathered Lots as defined by Paragraph 17 of the Amended and Restated Declaration of Washington Square Homeowners Association, Inc. ("Declaration") is less than 15% of the total number of Lots within the Washington Square community. Owner also understands and agrees that, if a Leasing Permit is issued to Owner, then Owner's leasing is subject to, and must comply with, all provisions of Paragraph 17 of the Declaration. Additionally, if Owner fails to lease his or her Lot for 120 consecutive days after the issuance of a leasing permit, then Owner's leasing permit shall automatically terminate and expire. Owner's Leasing Permit shall not be transferable to any other Owner or Lot. Owner understands that Owner may only use a lease form which is approved by the Board and which complies with Paragraph 17 of the Declaration. At least 14 days prior to entering into the lease of a Lot, the Owner shall submit to a copy of the proposed lease for approval to the Board of Directors.

Please complete the following:

1. Proposed commencement date of leasing: _____
2. Proposed term/length of lease: _____
3. Names, addresses, e-mail addresses, phone numbers (home, work and cell) of all proposed tenants and/or occupants of Owner's Lot (if known at this time):

<u>Name</u>	<u>Address</u>	<u>E-mail Address</u>	<u>Home Phone</u>	<u>Work Phone</u>	<u>Cell Phone</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

4. Non-resident address of Owner: _____
5. Phone numbers of Owner: (work) _____; (home) _____; (cell) _____
6. E-Mail address of Owner: _____

OWNER: _____
Signature

Date: _____
Name

(For Association Use Only)

Leasing Permit Application Received: _____
Number of Outstanding Leasing Permits and Grandfathered Lots: _____

This Leasing Permit Application is _____ Approved (Leasing Permit Attached), or _____ Denied.

By: _____
Signature Title

Date: _____

Please note: If your Application is denied, and you believe that your circumstances warrant, you may request a Hardship Leasing Permit by submitting a Hardship Leasing Permit Application and all relevant documentation to evidence or demonstrate your undue hardship.