



Rental Contact Information

Please complete and email to cs@communitymanagement.com or mail to 1935 Dry Creek Road, Suite 203, Campbell, CA, 95008.

Owner Information

Name(s): _____

Property Address: _____

Billing Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact(s)

Name (1): _____ Phone: _____

Name (2): _____ Phone: _____

Property Management Company (if applicable)

Name: _____ Phone: _____ Email: _____

Tenant Information

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Vehicle License Plate Numbers

_____, _____, _____, _____

Pets

Type: _____ Color: _____ Name: _____

Type: _____ Color: _____ Name: _____

Tenants agree to comply with all HOA Covenants, Conditions, and Restrictions, By-Laws, Rules and Regulations, and decisions. Owner shall provide tenants with copies of all documents.

Owner Signature: _____ Date: _____

Tenant (1) Signature: _____ Date: _____

Tenant (2) Signature: _____ Date: _____

Tenant (3) Signature: _____ Date: _____