ISLAND VILLAGE CONDOMINIUM ASSN, INC. C/O A&M Management Partners Company

AandMmgmt.com

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RENTER'S PROFILE

Your cooperation in completing this profile thoroughly and promptly will be greatly appreciated. Please return completed profile to the above email address. Per Florida Statutes, we are not allowed to supply owners or renters with email addresses.

1. UNIT #	2. OW	NER NAME:		
3. Tenant's Full Name:				
4. Address for Receiving Ma	ail:			
5. Telephone Numbers:				
Work #:	Work Na	me:		
6. E-Mail Address: ** To be used by Manager				
7. Emergency Contact:		Phone:		
8. Rental Information: +	landled by Owner? YE	ES NO _		
9. IF NO, please provide r	ame & phone number	of agent or person hand	ing rental:	
Name:		Phone:		_
10. Number of Persons in l	Jnit:	_ Lease Term (dates):	to	
Names of Others Living in U	nit:			
11. Please attach copy of le	ease and make sure te	nant understands where t	to park and has cop	y of rules and regulat
12. PETS: (Up to 2 indoor a **NO DOGS ARE ALLO	-			
Туре:	Name	:	Weight:	
Туре:	Name	;	Weight:	
13. VEHICLE / BOAT REGIS				State
Year Make	iviouei	COIOI	Iag#	

Date This Form was Filled Out: