

ARIZONA HOA MANAGEMENT, INC  
Resident/Landlord / Tenant Agreement

ASSOCIATION Rules & Regulations prescribe that the following information be provided to the Board of Directors within ten (10) days prior to the assumption of occupancy of your Unit by a tenant.

UNIT OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

UNIT NUMBER: \_\_\_\_\_ UNIT ADDRESS: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

AGENT'S ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

HOW MANY CHILDREN LIVING IN UNIT: \_\_\_\_\_

VEHICLES: MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_

I, \_\_\_\_\_ (Owner), hereby certify that I have provided all applicable documents as prescribed by the ASSOCIATION, and that I have advised my tenant of his/her responsibility to conform to the Rules and provisions of \_\_\_\_\_ (Community Name) and all other pertinent local, state and federal laws and ordinances.

Date: \_\_\_\_\_

I, \_\_\_\_\_ (Tenant), hereby certify that I have received, read and understand the Rules of the \_\_\_\_\_ (Community Name) and hereby agree to comply with those Rules and all other pertinent local, state and federal laws and ordinances.

Date: \_\_\_\_\_

**Return this form for your file to  
ARIZONA HOA MANAGEMENT, INC.,  
11225 N. 28<sup>th</sup> Drive Suite D220B, Phoenix, AZ 85029  
If you have any questions regarding this form  
call 602-944-3398.**