



OWNER OCCUPANT(S) FORM

UNIT # _____

UNIT OWNER(S) NAME(S) _____

PLEASE CHECK () ONE OF THE FOLLOWING:

() As the Unit Owner(s) of the above listed unit, I/We declare that we **DO** rent the above unit, but it is rented less than sixty (60) days out of the year.

() As the Unit Owner(s) of the above listed unit, I/We declare that I/We **DO NOT** have tenants renting the above unit.

Unit Owner Signature

Unit Owner Signature

Date