

1800 Atlantic Condominium Association, Inc.

1800 ATLANTIC CONDOMINIUM ASSOCIATION REGISTRATION FORM

(for anyone staying at 1800 without unit owners present)

UNIT # A-403

| Owner Name Tom Rechsteiner | Tel# | (305) 432-7482 |
|---|-----------------|----------------------------------|
| Rental Company Name NA | Tel# | NA |
| Arrival Date: | Departure: | |
| Primary Renter: Occupants (limit 6 for 2 bedroom units, 8 for 3 bedrooms): | Tel# | |
| Car Make & Color Parking info (pls circle one): Outside Lot / Covered Ga | | S State |
| 1800 Atlantic Condominium Association is a party to t tenant for violation of our rules and regulations. By si received a copy of the rules and regulations of the A agrees to abide by them or face eviction from the unit. | gning this agre | ement lessee acknowledges having |
| Signature of Primary Renter | Date | |
| Prior to arrival, payment of \$65.00 required from Owner or Rental Company with the | | |

submission of this form. Please make checks payable to 1800 Atlantic Condo

Association, Inc. Include unit # on check