

LAKEPOINTE GARDENS PROPERTY OWNERS ASSOCIATION, INC.

P. O. Box 2374

Valparaiso, IN 46384-2374

Phone: 219-781-7191 Fax: 219-286-7138

www.lpgpoa.org

PROPERTY LESSEE AFFIDAVIT

I hereby state my intent to lease the property located at _____,
Valparaiso, IN 46383 for the lease period beginning on _____, 201__.

I further attest to the following:

1. Occupancy of the dwelling will comply with the Lakepointe Gardens Declaration of Covenants' restriction to a "single family".
2. No prospective occupant has been convicted of a sexual offense.
3. Copies of the following named documents of the Lakepointe Gardens Property Owners Association, Inc. have been furnished to me and I understand all occupants of the property are required to comply with their direction:
 - A. Declaration of Covenants, Conditions, Restrictions and Easements of Lakepointe Gardens at Chandana.
 - B. By-Laws of Lakepointe Gardens Property Owners Association, Inc.
 - C. Lakepointe Gardens Property Owners Association, Inc. Rules & Regulations
4. I understand the term of my lease agreement will not exceed one (1) year and will be subject to re-approval by the Association each year.

Signed this _____ day of _____, 201__.

	<u>Signature</u>	<u>Phone</u>	<u>Email address</u>
Lessee(s):	_____	_____	_____
	_____	_____	_____

Instructions: Prospective renter(s) should complete, sign and furnish this form to the property owner/manager. The property owner/manager is required to furnish the form to the Association along with a copy of the signed lease agreement.