

PERMITTED OCCUPANT FORM

CURRENT MEMBER

I, _____, submit the name(s) of the following person(s), I am requesting to reside in my unit at

Address

Name

Name

Relationship to Member: _____

Relationship to Member: _____

Reason for the Request: _____

I understand this person(s) must pass a background check completed for \$15.00, they must attend an Orientation Session, and in allowing them to reside in my unit, they will have the right to call in work orders, but do not have voting rights. I am responsible for their actions. I have the right to ask this person(s) to vacate the unit at any time.

TO BE COMPLETED BY NON-MEMBER(S)

Full Name _____

Full Name _____

Date of Birth _____

Date of Birth _____

Social Security # _____

Social Security # _____

I understand that I must pass a background check completed by the Cooperative, attend an Orientation Session, and will then have the right to call in work orders, but do not have voting rights. I must abide by all rules and regulations established by the Board of Directors, as they pertain to all residents. Any violation of existing rules and regulations may result in the revocation of my Permitted Occupant status. I also understand that if the Member requests that I leave the unit, I must vacate the unit within 24 hours. Also, if the Member ceases to reside in the unit, I must vacate the unit at that time.

Signature of Non-Member

Date

Signature of Member

Date

Signature of Non-Member

Date

Approval of Board Member

Date