

Request for

Occupancy ____ Extension of Occupancy_____

(Copy of Deed must accompany this request)

All owners of record must approve this request

Date_____

To_____Condominium Association,

I/We Hereby request the Association approve

_____to reside /or extend occupancy in
my unit#_____

Start Date_____End Date_____

Thank you for your cooperation

_____OWNER

_____OWNER

Board Member_____

Board Member_____

(ASSOCIATION SEAL)

Revised Jan 2025