

**STOCKBRIDGE AT TANGLEWOOD
LEASE APPROVAL APPLICATION**

Name of Homeowner(s): _____

Current Address: _____

Address after Lease (if different): _____

Current Phone(s) (Day and Evening): _____

Address of Unit to be Leased: _____

I (We), the above-named owner(s) of the Stockbridge at Tanglewood Condominium unit listed above, have read and am aware of the Stockbridge at Tanglewood Bylaws and Amendments, in particular the Fifth Amendment to the Bylaws governing leasing of units. I hereby acknowledge responsibility to comply with all such requirements and request approval to lease the above-listed unit in accordance with Bylaw requirements.

I understand that I may not execute a lease prior to receiving written approval from the Board of Directors or its agent and that any lease executed prior to such approval will not be binding.

I understand that following receipt of written approval, I must submit a copy of the executed Condominium Lease approved by the Montgomery County Commission on Landlord Tenant Affairs along with the Stockbridge Lease Addendum within sixty (60) days of receipt of such approval, along with information on the names and number of tenant occupants. Failure to do so will result in forfeiture of approval to lease.

I also understand that I am responsible for registering as a landlord with the Montgomery County Commission on Landlord Tenant Affairs and must submit proof of payment of associated fees along with the executed lease.

Signatures of All Legal Owners of Unit:

Signed: _____ Date: _____

Signed: _____ Date: _____

Board of Directors Review	
Approved by: _____	Date: _____
Denied by: _____	Date: _____
Reason for Denial: _____	
