

THE RENAISSANCE ON TURTLE CREEK CONDOMINIUM ASSOCIATION INC.

## **OWNER/TENANT LEASE REGISTRATION AGREEMENT**

|   | Agreement") of The Renaissance on Turtle Creek Condominium                |
|---|---|
| (" <u>Condominium</u> ") is entered into and              | made effective on this day of, 202 by                                     |
| (Circle Chates) ( a beath as a second                     | , the Owner or Tenant   |
|   | the " <u>Resident</u> ") of Unit No. (the " <u>Unit</u> "). Resident is   |
|   | o leases and is subject, in all respects, to the Second Amended and       |
|   | e Renaissance on Turtle Creek Condominium filed of record in the          |
|   | , Texas as Document No. 202100292136, as may be amended and               |
|   | g without limitation, Section 1.6 thereof entitled "Leases" which         |
|   | ning permitted and prohibited leases, the Lease Restriction Period,       |
| •   | Any capitalized terms used in this Agreement which are not defined        |
|   | such term in the Rules. <u>This Agreement is required for each Owner</u>  |
|   | nant leasing a Unit. A Resident who is an Owner of a Unit, must           |
| •   | lease for his or her Unit referenced in this Agreement to the             |
| · · · · · · · · · · · · · · · · · · ·                     | a)(viii) of the Rules, prior to or together with this form. All deposits  |
| •   | Rules, including the lease registration fee of \$500.00, shall also be    |
| submitted to the Association prior to o                   | r together with this Agreement.   |
| Lineted Common Slamanta Assistant de                      | Hart let and A  |
| Limited Common Elements Assigned to                       | Unit (if any):  |
| Parking Space No. Storage                                 | e Space NoGarage Space No   |
| raiking space No Storage                                  | e space Nodarage space No   |
| Commencement Date of Lease*                               | Lease Restriction Period Expired?YesNo                                    |
|   | e a date <u>after</u> the last day of the Lease Restriction Period. Lease |
| •   | cing on the date the Unit was last conveyed to the current Owner and      |
| ending on the last day of the twelfth (12 <sup>th</sup> ) | <del>-</del>  |
| Term of Lease:  | (Shall not be less than one (1) year per Section 1.6(a)(iv)               |
| Resident Contact Information: Phone #:                    | : Alternate Phone #:  |
|   |   |
| Email address:  |   |
|   |   |
| Address other than Unit, if applicable:                   |   |
|   |   |
|   |   |
|   |   |
| (**If Owner is completing this form                       | n, please provide (a) physical address if Owner is not living in          |
| Condominium.)   |   |
| Resident's Occupants during Term of L                     | ease – Include names and ages of children, if applicable:                 |
| (4)   | (2)   |
| (1)(2)  | (3)   |
| Preferred Method of Contact**                             | EmailPhoneOther:  |
|   | tice of visitors or other day to day type matters.)                       |
| T vill apply to package deliveries, flot                  | tee of visitors of other day to day type matters.                         |

| Emergency Contact Name:  | <u> </u>   |
|--|--|
| Emergency Contact Phone #:   |  |
| Resident has completed the Vehicle Registration Agree  | ement:YesNo  |
| Resident has completed the Pet Registration Agreeme  | nt:YesNo   |
| Access/Key to Unit provided to/by Resident:You   | esNo   |
| Resident paid the lease registration fee in the amount of  | <b>\$500.00:</b> YesNo   |
| Access Device Issued to Resident for Common Element  | ts/Recreational Facilities? YesNo  |
| Association, or Manager, requests to properly effectuate The Association does not promise, guarantee, provide for kind whatsoever in connection with a lease of the Unwithout limitation, matters concerning lease compliant damage, injury (including death) to any person or proper Common Element in the Condominium. Resident reprovided is true and correct, the Lease Restriction reviewed the Rules and understands and agrees Rule understands and affirms no oral representations, state lease, the Unit, the Unit Owner, or the Unit Tenant, as thave been made by the Association, the Board of Direct each of their respective directors, officers, employees, Resident Signature: | or, represent or warrant any matter of any nature it by or to Resident, whichever applies, including, ce with the Rules, or any security, safety, theft, perty, or access to the Recreational Facilities and presents and warrants the information herein Period has expired for the Unit, Resident has applicable to the lease of Units, and Resident ements, or other agreements concerning the Unit he casemay be, or any other lease related matter ectors, Association Members, the Manager, and agents and representatives.  Printed Name: |
| Resident Signature:  | Printed Name:  |
| Date Signed:   |  |
| For Office Us  | e Only   |
| Copy of Executed Lease Lease Administrative  | FeeAccess Control Fee  |
| Other Fees:  | <u> </u>   |
| Connect: Scanned:  | Resident File:   |
| Manager Signature:   | Printed Name:  |
|  |  |