

BRIDGEPORT HOMEOWNERS ASSOCIATION

OCCUPANT ADD-ON REGISTRATION FORM

(This form is to be used for guests who are staying longer than 30 days)

Application Fee \$100.00 (no cash) Screen Fee per applicant

Owners Name: _____ **Owners Signature:** _____

Address: _____

Home Phone #: _____ **Cell:** _____

NAME OF OCCUPANT TO RESIDE IN HOME:

Name: _____

Home Phone #: _____ **Cell:** _____

SSN#: _____ **Date of Birth:** _____

Drivers License #: _____ **State:** _____

Employer: _____ **Years:** _____

Address: _____ **City:** _____ **Zip:** _____

Supervisor: _____ **Telephone:** _____

Present Address: _____ **City:** _____

State: _____ **Zip:** _____

Landlord Name: _____ **Telephone:** _____

Previous Address: _____ **City:** _____ **Zip:** _____

Landlord Name: _____ **Telephone:** _____

Occupant is subject to and shall abide by all covenants and restrictions and rules and regulations set forth in the Declaration of Conditions, Covenants, Easements and Restrictions for Bridgeport Homeowners Association; By-Laws of Bridgeport Homeowners Association; Articles of Incorporation of Bridgeport and any rules and regulations for Bridgeport.

Occupant Signature: _____ **Date:** _____

BRIDGEPORT HOA – OCCUPANT ADD-ON REGISTRATION FORM

**HAVE YOU EVER BEEN ARRESTED FOR ANYTHING OTHER THAN A MINOR
TRAFFIC OFFENSE?**

YES () NO ()

If yes, please explain:

Applicant represents that all information given is true and correct, and understands that as part of our procedure for processing your application an outside agency, will make an investigation from the information given and present their finding to us for review. This investigation may include, but is not limited to, character, general reputation, credit, residence and criminal search. Applicants agree not to hold the Association or its agents liable for the discovery or non-discovery of information or any actions taken as a result of this investigation. Authorization is hereby given to release banking, credit, residency, employment and other information pertinent to this application.

Signature: _____ **Date:** _____

Witness: _____ **Date:** _____