

VILLAS OF WINDMILL POINT II POA., INC.

273 SW STERRETT CIRCLE, PORT ST. LUCIE, FLORIDA 34953-3325

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NEW OCCUPANT APPLICATION AND REGISTRATION (FORM #1-OC)

(EACH ADULT APPLICANT MUST fill out a separate application- Copy and use additional forms for more than 1 adult)

1. **FOR THE VILLA ADDRESS OF:** _____

2. APPLICANT FULL LEGAL NAME: _____ 3. List any other middle, married, aliases, or any different name that you have used or are using: _____

4. CURRENT **RESIDENCE** ADDRESS (NO P.O. Boxes allowed) : _____

5. CURRENT Phone # _____

6. CURRENT **MAILING** ADDRESS (if different from above): _____

7. EMAIL ADDRESS: _____

8. List any other different or previous addresses you've used over the past 7 years: _____

9. Drivers Lic. or State ID#: _____ 10. STATE where issued: _____

11. Social Security or Tax ID#: _____ 12. Date of Birth : _____

13. Applicant's Employer or Source of income: _____

14. Employer Address + Ph.#: _____

15. Have you ever been charged with a Misdemeanor or Felony within the past 7 years? _____ 16. If yes, provide relevant details: _____

17. Do you have any outstanding judgments or claims or against you of any kind ? _____ 18. If yes, please provide relevant details: _____

19. Are you currently involved in any ongoing or pending or upcoming litigation or legal matters? _____

20. If yes, please explain: _____

21. Do you have any pets? _____ If yes, describe: _____

22. TOTAL MAXIMUM NUMBER OF OCCUPANTS AT ANY ONE TIME: _____ 23. LIST **ANY AND ALL OTHER INDIVIDUALS WHO MAY OCCUPY THE UNIT WITH YOU DURING YOUR LEASE TERM FOR MORE THAN SEVEN DAYS: PROVIDE FULL LEGAL NAME, AGE, AND RELATIONSHIP TO YOU OF EACH (Adults AND Minors):** _____

24. Have YOU or ANY of the above named parties ever occupied a unit in this community, or in any Association or Deed-Restricted Community before? _____ 25. If Yes, give address(es): _____