## Rental/Lease Information Provided to

## the Sovereign Oaks Home Owners Association Board

Name(s) of Property Owner(s)		
Address of property		
Property being rented:	[ ] Primary Residence	[ ] Guest House
Lease Start Date:	Lease End Date:_	
(Please attach a copy of the signed	lease agreement.)	
Contact Information for lessee(s)		
Name(s)		
Phone Number(s)		
Email(s):		
Other address:		<del>-</del>
Other Information		
During the period of this lease I/we	e (owners) can be contacted as follo	ws:
Phone Number(s)		
Email(s):		<u>-</u>
Other address:		
Advertising Venues used to rent th	is property:	

## Acknowledgements

I.	
I/we (names)	, as the owner(s) of the
above mentioned property within the Sovereign Oaks Residential Communit	cy in Asheville, North
Carolina, assert that this information is true and accurate. I/we also agree to	abide by he Sovereign Oaks
Rules and Regulations regarding leasing property within Sovereign Oaks (atta	ached).
(Signed)	
(Date)	
II.	
I/we (names)	, as the renter(s) of the
above mentioned property, recognize and acknowledge that Sovereign Oaks	s is a Planned Community as
defined by the Planned Community Act of North Carolina and agree to abide	e by the Sovereign Oaks
Protective Covenant and Design Guidelines while living within the communit	y.
(Signed)	
(Date)	