

Wyldeewood Village I of Cross Creek Condominium Association, Inc.

Please return to:

D&D Association Services

11000 Metro Pkwy. Suite #4

Ft. Myers, FL 33966

Phone: 239-364-4325

EMAIL: dawn@ddassociationservices.com

FAMILY/GUEST INFORMATION

To: The Board of Directors at Wyldeewood Village I in Cross Creek Condominium Association. In order to facilitate consideration of this application, I (we) represent that the following information is factual and true and agree that any falsification of misrepresentation of the facts in this application will justify its automatic rejection. **Guests are not permitted to bring pets onto the premises.**

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION: UNIT # _____

Occupancy date: _____ to _____

1. Full Name of Relative/Guest _____ Relationship: _____

2. Full Name of Guest/Spouse _____ Relationship: _____

3. Home Address: _____

4. Home Phone: _____ Work Phone: _____

5. Email Address: _____

The Association documents of Wyldeewood Village I in Cross Creek Condominium Association, Inc. provide an obligation of the unit owners that all apartment units are for single-family residence only.

Please state name, relationship, and age of all other persons who while be occupying the unit regularly.

Name	Relationship	Age
_____	_____	_____
_____	_____	_____

6. Make of Car _____ Year: _____ Tag#: _____ State: _____

7. I am aware of and agree to abide by the Association Documents of Wyldeewood Village I of Cross Condominium Association, the Articles of Incorporation, the Bylaws, and any and all properly promulgated rules and regulations in effect within the terms of my (our) occupancy. I acknowledge receipt of a copy of the Association rules and have provided guests with said Rules and Regulations.

Owner Signature

Owner Signature

D & D Association Services, LLC
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