

**Owner/Tenant Census Form**  
**Whispering Woods Homeowners Association Inc., of Pinellas County**

**Revised 4/18/2018**

**Unit Number** \_\_\_\_\_ Whispering Way, Tarpon Springs, FL 34689

**Name of Person(s) on Deed, Rent/Lease Agreement**

1. \_\_\_\_\_

Telephone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

2. \_\_\_\_\_

Telephone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

**Person to be billed for Monthly Assessment (Fee)**

Name \_\_\_\_\_

Billing Address (if different from above)

Street \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

**Names of Owner(s)/ Tenant(s) and any other Persons who will occupy unit:**

Total Occupancy is limited to 4 persons including Owner(s) and Tenant(s)

1. \_\_\_\_\_ Relationship \_\_\_\_\_

2. \_\_\_\_\_ Relationship \_\_\_\_\_

3. \_\_\_\_\_ Relationship \_\_\_\_\_

4. \_\_\_\_\_ Relationship \_\_\_\_\_

**Owner/Tenant Vehicles (Limit 2)**

1. Year \_\_\_\_\_ Brand \_\_\_\_\_ Model \_\_\_\_\_ License \_\_\_\_\_

2. Year \_\_\_\_\_ Brand \_\_\_\_\_ Model \_\_\_\_\_ License \_\_\_\_\_

**Owner(s)/Tenant(s) acknowledgement of receipt and agreement:**

I (We) have received, read, and agree to abide by the terms and conditions of the Whispering Woods Homeowners Association Inc., of Pinellas County Declaration and Bylaws and current Rules, Restrictions, Responsibilities and Remedies

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**For Tenant(s), a copy of Rent/lease agreement must be attached.**

**For purposes of this document the term Tenant(s) applies to Renter(s) under Rent Agreement(s) and Lessee(s) under Lease Agreement(s)**