

Walden Glen HOA Owner/Tenant Information

Please note that the Board needs this completed form on file with any new tenant. You may submit your completed form in any of the following ways:

1. By Mail at: P.O. Box 543, Cassville, GA 30123

2. Scan and send via email referencing street address to <u>waldenglenboard@gmail.com</u> Owner Name(s)

WG Address (Street # and Street Name ONLY)

Mailing Add (if different from WG Address)

(Where HOA billings to be mai	led)	
City/State/Zip		
Cell Phone		
Email		

Pool Fobs are issued by a HOA Board Member

If a fob was previously issued to this property and was not returned to The Board, new fob(s) will be needed at a cost of \$10 for each fob(s). Fobs are the property of Walden Glen HOA and at termination of lease must be returned to a board member. Email the board to make arrangements for return. Please email any updates to this information to the Board of Directors at <u>waldenglenboard@gmail.com</u>

The only exception is change of ownership.

Tenant Information (Only complete if you are renting your property)

Tenant Name(s)
Cell Phone
Email

Please attach a current copy of the Lease Agreement with your Owner/Tenant Information and a completed Pool Access Proxy Form. Please submit updated Owner/Tenant Information form by email to Board of Directors at waldenglenboard@gmail.com for each lease renewal or change of tenant.

Walden Glen Homeowners Association, Inc. Proxy Appointment Form

Date: _____

To: Walden Glen Homeowner's Association, Inc. Walden Glen HOA Board of Directors P.O. Box 543 Cassville, GA 30123

_______, the undersigned possessing ownership interest in the property situated at ________ is a member in good standing of the Walden Glen Homeowners Association, Inc. and as such is entitled to access community amenities and common areas including the pool at 11 Rosebury Ct, Cartersville, GA 30120. The undersigned **DOES HEREBY** designate and appoint ________ to be the PROXY of the undersigned member and to obtain from the Board of Directors and maintain possession and use of the pool access fob issued for my property. The Proxy shall have full rights of use, as a substitute of the undersigned member and current tenant of my property, to utilize community amenities and attend community-hosted events. I understand any suspension of membership rights for any reason will apply to both my tenant(s) and myself and that my tenant(s) is subject to the pool rules set forth by the association.

This appointment of Proxy revokes any prior appointment of Proxy and shall be effective until ______. I have attached/included a current copy of the lease agreement between the above listed tenant and myself. This lease agreement ends on ______. I understand pool access will be suspended one day after this date should I fail to provide a current lease agreement to the Board of Directors Walden Glen HOA, Inc. I agree to notify the Board of any changes in tenancy of my property.

Owner/Member Signature		Date		
Owner/Member Printed Name				
State of Georgia				
County of				
This instrument was signed and sworn b by		day of	, 20,	
	Notary Signature			
	Notary Printed Name Notary Public for the State of			
Affix Seal of Notary Public Above		on expires:		