

*Leeland Station Community Association*

**LANDLORD**

**AMENITIES RELINQUISHMENT FORM**

**EACH HOUSEHOLD HAS RECEIVED THE APPLICATION FOR COMPLETION. IF THE HOME IS LEASED, THIS FORM MUST BE RECEIVED PRIOR TO POOL ADMITTANCE FOR YOUR TENANTS.**

**Owner Name:** \_\_\_\_\_

**Leeland Station Property Address:** \_\_\_\_\_

**Current Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Homeowner Phone:** (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Email Owner 2:** \_\_\_\_\_

**Tenant's Names:** \_\_\_\_\_

**LeaseTerm\*:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **to** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**\*Attach Current Lease - Copy of current lease must be provided every year with the form before entry to the pool will be granted to your tenants.**

**Number of Tenants on lease:** \_\_\_\_ **Over 18 years of age** \_\_\_\_ **Under 18 years of age**

***THE UNDERSIGNED OWNER OF LEELAND STATION COMMUNITY ASSOCIATION, INC., HEREBY RELINQUISHES RECREATIONAL AND ACTIVITY USE PRIVILEGES TO THE TENANT(S) NAMED ABOVE. IN ACCORDANCE WITH THE GOVERNING DOCUMENTS, I AGREE TO BE RESPONSIBLE FOR THE ACTIONS OF MY TENANTS, MEMBERS OF THEIR HOUSEHOLD, AND THEIR GUESTS. I HAVE READ THE RULES GOVERNING THE USE OF LEELAND STATION COMMUNITY ASSOCIATION, INC. SWIMMING POOL. BY SIGNING BELOW, I ACKNOWLEDGE THAT I FULLY UNDERSTAND THESE RULES.***

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***THIS RELINQUISHMENT FORM ALONG WITH A COPY OF THE LEASE IS REQUIRED EVERY YEAR BEFORE ACCESS IS GRANTED TO THE TENANT.***

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**FORM DELIVERY:**

- **MAIL TO: LEELAND STATION COMMUNITY ASSOCIATION**  
923 MAPLE GROVE DRIVE, SUITE 101  
FREDERICKSBURG, VA 22407
- **EMAIL TO [KATRINEA.ERB@FSRESIDENTIAL.COM](mailto:KATRINEA.ERB@FSRESIDENTIAL.COM) or [KORILEE@FSRESIDENTIAL.COM](mailto:KORILEE@FSRESIDENTIAL.COM)**
- **FAX 540-786-4980**