

**THE CONDOMINIUMS OF INDIAN HARBOUR ASSOCIATION, INC.**  
**GUEST OCCUPANCY FORM**

1. FULL NAMES OF OWNERS AND/OR TENANTS. INDICATE WHETHER OWNERS OR TENANTS:


2. THE OWNER/TENANT INTENDS TO HAVE A GUEST OR GUESTS IN THE ABSENCE OF THE OWNER OR TENANT, WITH THE NAMES OF THE GUEST(S) BEING:

\_\_\_\_\_

3. RELATIONSHIP OF EACH GUEST TO THE OWNER/TENANT:

\_\_\_\_\_  
*(Please note that the only guests who may occupy a Unit overnight when the owner or tenant is absent are the following family members: Parents, grandparents, children, sisters and brothers and their spouses.)*

4. AS PROVIDED FOR IN SECTION 12.2.A.2 OF THE AMENDED AND RESTATED DECLARATIONS OF CONDOMINIUM, BOTH THE OWNER/TENANT AND GUESTS MUST ATTEST THAT THE GUEST IS NOT PAYING ANY RENT OR OTHER CONSIDERATION FOR THE OCCUPANCY, WHICH IS BEING SIGNED UNDER THE PENALTY OF PERJURY.

OWNER/TENANT:

GUEST(S):

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

PLEASE RETURN TO:  
**Vesta Property Services**  
**907 E Strawbridge Ave. Suite 104**  
**Melbourne, FL 32901**  
or via email to [info-sc@vestapropertyservices.com](mailto:info-sc@vestapropertyservices.com)