

# TAARIFA GARDENS

## APARTMENT LEASE/SALE FORM

OWNER:

APARTMENT No:

### TENANT DETAILS

NAME:

DATE OF BIRTH:

ID/PASSPORT No:

TELEPHONE

Res:

E-MAIL ADDRESS:

SERVICE CHARGE/UTILITY BILLS:

TO BE PAID BY:

OWNER

TENANT

NAME OF BUSINESS/EMPLOYER:

TELEPHONE:

Off:

Fax:

NAME OF SPOUSE:

CONTACT:

EMAIL:

SPOUSE'S ID/PASSPORT No:

SPOUSE'S EMPLOYER/BUSINESS:

### IMMEDIATE FAMILY MEMBER DETAILS

NAME	RELATION	DATE OF BIRTH	BLOOD GROUP	PROFESSION	GENDER

TERMS/PERIOD OF LEASE: \_\_\_\_\_

VEHICLE REG NUMBER \_\_\_\_\_

I \_\_\_\_\_ undertake to abide by the rules and regulations of Taarifa Gardens

Signed: \_\_\_\_\_

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

TENANT

I/We \_\_\_\_\_ undertake to pay the lease fee of Kshs.5000/- and attach herewith

my/our cheque No \_\_\_\_\_ payable to Taarifa Gardens Management Ltd.

### REFEREES

1. \_\_\_\_\_ ID NO \_\_\_\_\_ SIGN \_\_\_\_\_

2. \_\_\_\_\_ ID NO \_\_\_\_\_ SIGN \_\_\_\_\_

**Owners should ensure their Tenants adhere to rules & regulations that have been put in place**

Signed: \_\_\_\_\_

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

OWNER

LEASE/SALE CONSENT GRANTED BY.....Chairman /Secretary

Signed: \_\_\_\_\_

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

**NB: Referees shall be vetted by the committee on your potential tenant and Owners should not confirm to the tenant prior to committee's consent.**

