

# ABSENTEE OWNER STATEMENT (AOS) Facilities Use Agreement for Tenants

**Email Completed AOS Form & Copy of Lease to [info@broadlandshoa.com](mailto:info@broadlandshoa.com)**

**Incomplete forms will be denied. Tenants will not be granted access until a completed form and current lease are submitted.**

Broadlands Property Address: \_\_\_\_\_

Absentee Owner Name: \_\_\_\_\_

Absentee Owner Phone(s): \_\_\_\_\_

Absentee Owner Email: \_\_\_\_\_

As the Owner of the Broadlands Association property listed above, I agree to relinquish my Broadlands facility privileges to my **tenant(s) named on the lease:**

\_\_\_\_\_ as well as those members of their household who are allowed under the terms of my lease to reside in the household. **A copy of the lease shall be provided to Broadlands Association** as validation of their occupancy during the term of the lease. The current lease agreement is for the following term:

Start Date of Lease: \_\_\_\_/\_\_\_\_/\_\_\_\_ Expiration Date of Lease: \_\_\_\_/\_\_\_\_/\_\_\_\_

Tenant Phone(s): \_\_\_\_\_

Tenant Email Address: \_\_\_\_\_

**I give permission for my tenant(s) to use the following Broadlands facilities and understand that these Broadlands Amenities will only be issued to either an owner OR a tenant and in NO instance will privileges be granted to both parties (check all that apply):**

- POOLS (*Southern Walk, Community, Summerbrooke*)
- FITNESS CENTER (*Clubhouse lower level*)
- COMMUNITY CENTER (*Paid rentals only*)
- TENNIS COURTS

*One account per unit address is permitted in the amenities database, therefore, owner accounts will be deleted upon the transfer of privileges to tenants.*

I agree to take full responsibility for the actions of my tenants, the members of their household and their guests at all times and will assume full responsibility to Broadlands Association of any costs incurred and/or unpaid by my tenant. I certify that my tenants have read and understood the pool, fitness center, Community Center and Tennis rules, that all persons using these facilities agree to abide by such rules, and that any infractions of the rules may result in suspension of privileges to use Broadlands Association facilities for both my tenants and myself.

Absentee Owner Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Absentee Owner Current Address: \_\_\_\_\_

*The absentee owner's current address must match the billing address shown on our management company's records, FirstService Residential, Inc. Owners must submit a written request to [ar.dcmetro@fsresidential.com](mailto:ar.dcmetro@fsresidential.com) for changes to contact information such as billing address, phone, or tenant information. You may copy [info@broadlandshoa.com](mailto:info@broadlandshoa.com) when submitting your request, however, the official notification must be made by you directly to FirstService Residential. You may also contact FirstService Residential at 703-385-1133 for inquiries.*

**Office Use:**

Date Rec'd: \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner Name and Billing Address Verified (FSR):

Notes: \_\_\_\_\_