Copperchase Condominiums

Rental Request Form

Owner Information						
Full Name:	Name:			Date:		
	Last	First		M.I.		
Address:						
	Street Address					Apartment/Unit #
	City			State		ZIP Code
Phone:			Email			
i floric.		_	Email			
CC Unit Nu	mber to be rented	-				
		Sig	ınature <u> </u>			
Signature:					Date:	
		Re	turn to			
Mail						
		Copperchas	e Condominiums			
		11300 N. Penr Oklahoma	nsylvania Ave, #194 City, OK, 73130			
On a re-ail		man ail a anna				
Or email	copperchaseokc@g	gmail.com:				
Date Revie	wod	For Boa	rd Use Only			
	mber of leases					
	ood standing					
J 9						
Approved			Denied			
Date Appro	oved		Date Denied			
Approval Expiration Date			Reason for Denia	ıl		
Date Received Copy of Lease			Added to Waiting	List		
Date Received Forms			Number in Line			