

INDIAN WELLS OSCEOLA COUNTY HOMEOWNERS ASSOCIATION

2024 HOA APPLICATION

Please complete one application for each home owned within the community and return it to us. Include a check in the amount of **\$100 per home**, made payable to the Indian Wells HOA and mail to:

IWHO
3101 Polynesian Isle Blvd
Kissimmee, Florida 34746

*****NO HOA RENEWALS ACCEPTED AFTER FEBRUARY 29, 2024*****
NEW HOMEOWNERS ONLY

Please Print CLEARLY

Homeowner Information	
Homeowner Name:	
Indian Wells Address:	
Mailing Address (if Not Resident):	
City:	
State/Province/Country:	
Zip/Postal Code:	
<u>Mandatory Email Address:</u>	
<u>Mandatory Telephone* (include area code):</u>	
Resident <input type="checkbox"/> Long Term Rental <input type="checkbox"/> Short Term Rental <input type="checkbox"/>	
Rental Property Information	
Management Company:	
Management Address:	
Management City and Zip Code:	
Management Telephone:	
Management Company Contact:	
Management Company Email:	
<i>Long Term Rentals must provide</i>	
Tenant Name:	

Phone numbers are only for in case of emergency should we need to contact you

DO WE HAVE PERMISSION TO SHARE YOUR INFORMATION IF REQUESTED? __ Yes __ NO

Board Member Initials: _____ Payment Date: _____ Payment Type: _____