

**Sworn Declaration of Estrangement  
Addendum to Application**

Household Name \_\_\_\_\_ Unit # \_\_\_\_\_  
Development \_\_\_\_\_  
Name The Lakes at San Marcos City Tallahassee

I hereby certify that:

- 1. I am separated and estranged from my spouse.

Full Name of Spouse: \_\_\_\_\_

I further certify that I do not intend to reconcile with my spouse.

- 2. If reconciliation occurs, my spouse will not be permitted to reside with me in the above-referenced development unless at least twelve months have elapsed since the beginning of the initial lease term.
- 3. If reconciliation occurs prior to expiration of the twelve-month timeframe cited above, and my spouse wishes to reside with me in the above-referenced development, our entire household must re-qualify as a new household.

Under penalty of perjury, I certify that the information presented in this declaration is true and accurate to the best of my knowledge. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

\_\_\_\_\_  
Signature of Applicant/Tenant      Printed Name of Applicant/Tenant      Date