

VILLAGES OF BONITA HOMEOWNERS ASSOCIATION, INC.
APPLICATION FOR LEASE APPROVAL

I/we hereby submit this form for lease approval (address) _____
 at Villages of Bonita Homeowners Association, Inc. from (name of owner)
 _____ or rental company _____.

I/we represent that the following information is factual and correct, and agree that there is no falsification or misrepresentation in this information. I/we consent to your further inquiry concerning this application, particularly of the references given below.

PLEASE PRINT THE FOLLOWING INFORMATION CLEARLY:

Full name of applicant(s): _____

Mailing address: _____

Phone number: (____) _____ Cell: (____) _____

Email: _____

1. I/we am/are renting this unit
 - a. Annually beginning (date) _____
 - b. Monthly beginning _____ and ending _____
2. The documents of Villages of Bonita Homeowners Association, Inc. provide for the obligation of unit owners that all units are to be used as single-family residences only. Please state the name, age and relationship of all other persons who will be occupying the unit on a regular basis:

Name: _____ Age: _____ Relationship: _____

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Name: _____ Age: _____ Relationship: _____

3. Have you (or any of your occupants) ever been convicted of a felony? Yes___ No___

4. Renters are not permitted to have pets. Do you have a service animal? Yes___ No___

Do you have an emotional support animal? Yes___ No___

If yes to either animal above, please provide appropriate documentation from a licensed medical/mental health professional as proof of need.

5. Person to be notified in the case of emergency:

Name: _____ Phone #: _____

Address: _____ Email _____

6. Make of car(s) to be kept at the residence:

Model/Make: _____ Year: _____

Color: _____ Plate #: _____ State: _____

Model/Make: _____ Year: _____

Color: _____ Plate #: _____ State: _____

7. Realty Company handling the leasing (if applicable):

Company Name: _____

Address: _____

Contact Person: _____ Phone #: _____

E-mail Address: _____

I/we understand and agree that in the event a unit is LEASED, the association is authorized to act as the owner's agent, with full power and authority to take whatever action that may be required, including eviction to prevent violations by lessee and their guests, of provisions of the Declaration of Covenants of the Association, Articles of Incorporation, By-Laws, and the Rules and Regulations of the Association. I/WE ALSO UNDERSTAND THAT THE PROPOSED LEASE OF A UNIT WITH OVERDUE ASSESSMENT(S) WILL BE DENIED.

By signing below, I/we are aware of and agree to abide by the Association's Governing Documents, and any and all other properly promulgated rules and regulations and amendments in effect within the terms of my/our rental, a copy of which is to be provided by the owner or rental agent.

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Dated: _____

Signature of applicant_____
Print Name_____
Signature of co-applicant_____
Print Name

Please return this completed form to the address below with the following items:

\$50.00 non-refundable processing fee payable to Villages of Bonita Homeowners Association, Inc.

For rentals of six months or less where the applicant/s is not known personally to the owner, please supply three (3) Character Reference Forms.

For annual rentals of six months and one day or more where the applicant/s are not known personally by the owner a BACKGROUND CHECK IS REQUIRED. Please enclose

- 1. \$30.00 PER ADULT non-refundable background check fee payable to SAK & Associates Mgmt, Inc.**
- 2. Disclosure consent form complete for each adult applicant for background check.**

Character Reference Form

Date: _____

RE: Applicant's Name: _____

Applicant Reference's Name (Please Print): _____

Street Address: _____

City, State, & Zip: _____

Telephone Number: _____

Email Address: _____

To Whom It May Concern:

The applicant named above is applying for rental in a Deed Restricted Community in Southwest Florida. The Board of Directors would appreciate it if you would furnish us with whatever information you consider pertinent in verifying the character and stability of the applicant.

Upon completion, please return this form to the APPLICANT. This completed Character Reference form MUST be sent with the application in order for the Board to approve their lease. Thank you for your assistance in this matter.

How do you know the applicant? _____

For how long have you known the applicant? _____

Would the applicant make a good neighbor, in your opinion? ☐ Yes ☐ No

Please describe the applicant's character and stability, as you know them:

Reference's Signature: _____

Character Reference Form

Date: _____

RE: Applicant's Name: _____

Applicant Reference's Name (Please Print): _____

Street Address: _____

City, State, & Zip: _____

Telephone Number: _____

Email Address: _____

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DISCLOSURE CONSENT APPLICATION
For Annual lease (Six months plus one day or more)

Please complete this form for each person to occupy the unit of the age 18 and older. Please do not leave any blanks, as this will result in a delay of the processing of the application.

Please Print Your Full Name	Social Security Number
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Please Print Any Other Names You Have Used	Date Of Birth
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Street Address

City	State	Zip Code
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Driver's License #	Exp. Date	State Issued
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I hereby give consent for an investigative consumer report to be prepared on me, which may include information about me obtained from Law Enforcement Agencies, State Agencies, as well as Public Records information such as credit reports, social security information, criminal history information, motor vehicle records and workers' compensation records, such as are allowed by law and in accordance with the Americans With Disabilities Act.

Signature	Date
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Witness	Date
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Street Address		
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City	State	Zip Code
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Signature	Date
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Witness	Date
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