

APPLICATION FOR APPROVAL TO LEASE CONDOMINIUM UNIT

PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

c/o Gulf Breeze Management Services of S W Florida, Inc.
8910 Terrene Court - Suite 200
Bonita Springs, FL 34135-9514
Tel: (239) 498-3311 FAX: (239) 498-4974

DO THE APPLICANT(S) BELOW SPEAK, WRITE AND UNDERSTAND THE ENGLISH LANGUAGE? Yes [] NO []
If NO--- Provide in detail the method of translation used to interpret and fully understand the contents of this form, and the condominium documents, rules and regulations noted in the acknowledgements of this form.

SPECIAL PROVISION-Read Carefully

I have been provided access to an Abridged Version of the Rules and Regulations and Related Information. The latest version may be accessed at www.piperspointecondo.com in the documents section. I have read and understand this abridged version prior to executing this agreement. I understand that I will share the contents this abridged edition with my family and guests when hosting them for any extended stay.

I acknowledge this provision of the application by signing here:

SIGNATURE OF LESSEE

PRINTED NAME

SIGNATURE OF CO-LESSEE

PRINTED NAME

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IMPORTANT NOTICE

Leases in Piper's Pointe Condominium Association, Inc. are for a maximum term of one (1) year. You are hereby advised that your tenancy or lease must be renewed each year before the anniversary date of the existing lease and that renewal must be approved by the Board of Directors. There will be a \$10.00 Renewal Fee each year, payable with renewal application to Piper's Pointe Condo. Assoc., Inc. [Use PPCA Form LR for renewals].

The necessary and proper submission of this Lease Application is the sole responsibility of the owner of the unit and said owner(s) is/are responsible to ensure that the applicant and/or leasing agent completes the entire application. The current version of the application form must be utilized, each page of the

application shall be initialed by the applicant; all information shall be clearly legible without exception; all items are to be answered and if not relevant, N/A shall be indicated.

A copy of the Lease Agreement must be attached along with a check or money order in the amount of One Hundred USD (\$100.00) for processing.

This application, accompanied by all requested documents shall be submitted to Gulf Breeze Management of S W Florida, Inc. at least thirty (30) days prior to the expected lease commencement; [Seven (7) days if applying under the provisions of Florida Statute 250.01]. If any information is missing and/or requires clarification, the applicant has three (3) days to comply with the request for additional information.

The applicant and owner are responsible for updating all information with Gulf Breeze Management of S W Florida, Inc. during the term of the lease. [All changes require Board of Directors approval].

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I hereby apply for approval to LEASE in Unit # _____, located at # _____ Wading Bird Circle/Grand Oaks Way in Piper's Pointe, a condominium, for the period beginning:

_____ and ending _____.

Is the Lessee currently in active military service of the United States as defined in Florida Statute 250.01? Yes _____ No _____

Current Owner of Record (Full Name):

Full Name of Lessee: _____

Current Address: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

Country: _____

E-Mail Address: _____

Home Phone # _____ Work # _____

Cell # _____ Other _____

Date of Birth (MM/DD/YYYY) _____ Social Security Number: _____

Occupation/Business/Profession: _____

Employer: _____ Tel. # _____

Address: _____

If Retired: Former Occupation Business/Profession: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

Full Name of Co-Lessee (If applicable): _____

Current Address: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

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Country: _____

E-Mail Address: _____

Home Phone # _____ Work # _____

Cell # _____ Other _____

Date of Birth (MM/DD/YYYY) _____ Social Security Number: _____

Occupation/Business/Profession: _____

Employer: _____ Tel. # _____

Address: _____

If Retired: Former Occupation Business/Profession: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

ADDITIONAL RESIDENTS:

Please state name, relationship and date of birth of all persons to be in residence (Social Security Number for Occupants 16 years and older required)

Occupant #2	Relationship	Age
SS # _____	D.O.B.: _____ / _____ / _____	

Occupant #3	Relationship	Age
SS # _____	D.O.B.: _____ / _____ / _____	

Occupant #4	Relationship	Age
SS # _____	D.O.B.: _____ / _____ / _____	

- **Three (3) Bedroom Units only**

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* _____
Occupant #5 _____ Relationship _____ Age _____
SS # _____ D.O.B.: _____ / _____ / _____

* _____
Occupant #6 _____ Relationship _____ Age _____
SS # _____ D.O.B.: _____ / _____ / _____

*Are **all** proposed Lessees U.S. citizens? Yes _____ No _____

If no, what is the immigration status?

*Has the Lessee or Co-Lessee ever filed bankruptcy? Yes ___ No ___ Year?

*Has anyone to be in residence been convicted of a felony? Yes ___ No ___ YEAR

Reason: _____

Has anyone to be in residence been convicted for being under the influence **or** dealing in drugs, including alcohol? Yes ___ No ___ YEAR _____

Has anyone to be in residence been convicted of a sexual related offense? Yes ___ No ___

PERSONAL VEHICLES:

Make/model of cars to be parked at the condominium (maximum two vehicles permitted to each unit). All vehicles require a Piper’s Pointe Condo. Assoc. issued parking permit which is always to be properly displayed while on the property. Refer to Rules and Regulations for Guest parking protocols. **PERMITS REMAIN PROPERTY OF THE ASSOCIATION.**

#1 Make/Model _____ Year: _____ State/Prov: _____ Color: _____

Plate/Tag _____ REGISTERED OWNER: _____

Is this vehicle manufactured or used for commercial business? _____

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#2 Make/Model _____ Year: _____ State/Prov: _____ Color: _____

Plate/Tag _____ REGISTERED OWNER: _____

Is this vehicle manufactured or used for commercial business? _____

IN AN EMERGENCY

Person to be Notified in Case of Emergency:

Name: _____ Relation: _____

Home Phone: _____ Other: _____ Cell Phone: _____

Address: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

HISTORY

Name of Current or Most Recent Landlord (If owned state "owned"):

Address: _____

City: _____ State: _____ Postal/Zip Code: _____

Telephone #: _____ Ownership: How Long: _____

Rented: How Long: _____

If leased/rented: May we consult the most recent landlord? _____

CHARACTER REFERENCES

Two (2) Required – Local preferred – NON-FAMILY MEMBERS REQUIRED See Attached Character References forms to be completed and returned with this application. The Board of Directors reserves the right to contact Character References for the purpose of processing the application.

The Piper's Pointe Condominium Association, Inc. shall hereinafter be referred to as the **"Association"**.

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Additionally, the Board of Directors reserves the right to interview the prospective Lessee, co-Lessee and all other person intended for residency who have reached the age of eighteen (18) years of age.

Mailing Address for Notices Associated with This Application.

Name: _____

Address: _____

E-mail: _____

ACKNOWLEDGEMENTS

Piper's Pointe Condominium Documents specify that "each condominium unit shall be occupied by a single family, as a residence, and for NO OTHER PURPOSE WHATSOEVER," and "in no event shall occupancy exceed two (2) persons per bedroom and/or den."

Subsequent changes to this occupancy information must be reported to the Association (e.g. children, parents or relatives moving in with you.)

Acknowledged by initialing here: _____

I understand that the Association requires that a Florida HO-4 Insurance Policy must be obtained and maintained prior to occupancy and during occupancy respectively. **Acknowledged by initialing here:** _____

I understand and agree that the Association **prohibits boats, motorcycles, trucks (including pick-up trucks, vans not designed for passengers, vans with racks, tool bodies, welder's compressors or other equipment in or attached to the bed or roof), and any commercial vehicles, vehicles used for commercial purposes, trailers,**

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recreational vehicles, vehicles with a wheel size more than 33 inches high or other motor vehicle, except four (4) wheel passenger automobiles, vans or trucks built by the manufacturer as passenger trucks as determined by the Board of Directors shall be placed, parked or stored on the Association property for a period more than four (4) hours in the aggregate, in anyone 24 hour period unless such vehicle is necessary in the actual construction and/or repair of a structure or for ground maintenance nor shall any maintenance or repair be performed on any boat or motor vehicle not owned or controlled by the Association. Normal working hours are 7:00 AM to 7:00 PM. Outside this time frame allowed only for an Emergency. No vehicle of any kind in serious need of visual repair may be placed, parked, or stored in Association property for a period of more than four (4) hours. Vehicles leaking any fluids, such as grease and oil, shall not be placed, parked, or stored on Association property at any time. *{For the purposes of clarification, the intended interpretation of the four (4) hour rule was and is to allow visitors to park up to four (4) hours and to preclude the parking of prohibited vehicles by residents/owners.}*

Acknowledged by initialing here: _____

Do you currently harbor any pets that you intend to harbor in Piper’s Pointe? _____

I understand and agree that lessee(s) and occupants are NOT ALLOWED to harbor any pets of any kind and will comply with these provisions during the term(s) of my lease. I acknowledge that I will be subject to prosecution for any violation of the laws of the State of Florida as they pertain to “Emotional Support or equal” animals.

Acknowledged by signing here:

1. Signature Required

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I will comply with the provision in the rules set forth by the Board of Directors to maintain the entry and door to my unit so that it is clean and free of any debris including sweeping and removing environmental foreign objects. **Acknowledged by initialing here:** _____

I understand and agree that the Association, in the event it approves this LEASE, is authorized to act as the owner's agent, with full power and authority to take whatever action it deems necessary, including eviction, to prevent violations by lessee(s) and their guests, of provisions of the Documents and the Rules and Regulations of the Association; the laws of the State of Florida and Collier County. **Acknowledged by initialing here:** _____

I further agree to comply with the directives set forth by the Board of Directors of the Association or their agent, as may be promulgated from time to time. **Acknowledged by initialing here:** _____

I agree that no LEASE unit shall be SUBLEASED and/or LOANED to others. A violation of this section will result in termination of the lease. **Acknowledged by initialing here:** _____

SIGNATURE OF LESSEE

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To facilitate consideration of this application, I the undersigned hereby states that all information provided for this application is factual and correct and agree that any falsification or misrepresentation will justify its disapproval. The undersigned further agrees to abide by all Piper’s Pointe Condominium Association, Inc. rules and regulations and understands any violation of the stated rules and regulations may result in eviction.

Section 13.6 of the Amended and Restated Declaration of Condominium, which tenants are subject to, provides that tenants are required to abide by the terms of the Declaration and the rules and regulations of the Association along with any other provisions in those documents. Should you fail to abide by those provisions, you hereby acknowledge that the Association has the authority to terminate your lease on behalf of your landlord and cause your removal from the property regardless of any provisions contained in your lease. In the event of such breach, you acknowledge and agree that your lease may be terminated by the Association and that you may be forced to vacate the unit, with any right of action brought by the Association being subject to a summary procedure in which the court advances the cause on its calendar.

This is executed as a sealed instrument, signed this _____ day of _____ in the year _____.

Applicant: _____ Witness: _____

Applicant: _____ Witness: _____

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MANDATORY: By signing below the owner and/or the realtor acknowledges and confirms that the rules and regulations of the Association are made available to the applicant. [The Rules & Regulations, along with other necessary information are available on PipersPointeCondo.com. *An application submitted without signature below will be considered an incomplete application and deemed received as such.*

OWNER OR AGENT SIGNATURE

PRINTED NAME OF REALTOR / AGENT EXECUTING THIS LEASE

D B A: _____

ADDRESS: _____

CITY: _____ **STATE** _____

TELEPHONE: _____ **E-MAIL:** _____

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APPLICATION PROTOCOL

A prospective lessee will be advised by the Association office within a fifteen (15) day period from the date of receiving the application, of whether this application has been approved. An APPROVAL is VOID in the event of false statements in this application.

A non-refundable fee in the form of a check for One-Hundred Dollars (\$100.00 USD) payable to Gulf Breeze Management Services of SW Florida, Inc, must accompany this application for the purpose of defraying the costs associated with checking references, credit investigations, directory updating, and other expenses related to the processing of this application. A valid Social Security number is required for this purpose and will be safeguarded in accordance with all provisions of governmental regulations.

Short Term Lease Agreements (minimal three months): A second check for a REFUNDABLE SECURITY DEPOSIT in the sum of Seven Hundred Dollars (\$700.00 USD) made payable to Piper's Pointe Condominium Association must also accompany this application.

Long Term Lease Agreements: A second check, submitted by the applicant, for a REFUNDABLE SECURITY DEPOSIT in the sum of One Thousand Two Hundred Dollars (\$1,200) made payable to Piper's Pointe Condominium Association **from the applicant** must also accompany this application.

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FOR OFFICE USE ONLY

Notes:

- ___ All entries addressed
- ___ Legible Completed Application
- ___ Two (2) References
- ___ Proof of HOA-4 Insurance Policy confirmation
- ___ \$100.00 payment to Gulf Breeze Management
- ___ \$1,200.00 Security Deposit by and for applicant (Long Term Lease)
- ___ \$700.00 Security Deposit (Seasonal Lease)

Date Received: _____ by: _____ G B M

Forwarded to the BOD on: _____ to

ACTION TAKEN BY THE BOARD OF DIRECTORS

Approved _____ Disapproved _____ Date: _____

Board Member: _____ Office: _____

Management: _____