PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

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 since re-read and understand any changes to the abridged version prior to executing this agreement. It is understood, that I will continue to share the contents this abridged edition with my family and guests when hosting them for any extended stay.

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PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

I acknowledge this provision of the application by signing here:		
	SIGNATURE OF LESSE	E
	PRINTED NAME	
	SIGNATURE OF CO-LESS	5EE
	PRINTED NAME	-
APPLICATION FOR	APPROVAL TO RENEV	V CONDOMINIUM LEASE
PRINT	LEGIBLY UNLESS SIGNATURE	E IS REQUIRED
I hereby apply for approval to Circle/Grand Oaks Way in Pip		, located at # Wading Bird ociation, Inc.
For this document, the Piper's referred to as the "Associatio		ation, Inc. shall hereinafter be
Piper's Pointe. <u>It must be rec</u>	ceived at least thirty (30) days	enew a long-term lease for a unit in before the current lease expires and ement/Contract signed by both the unit
•	• •	Gulf Breeze Management Services of iper's Pointe Condo Assoc. Inc), at the
1. Full Name of Lessee:		
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2. Phone #'s: Home:	Business:	
Cell:	Other:	
3. Date of Birth (MM/DD/YYYY):	Social Security #: XXX-	XX
4. E-Mail Address		
5. It is my intention to renew my lea	ase in the above cited unit owned by:	
commencing:	to	·
6. Occupation/Business/Profession:	:	
Company/Firm Address:		
	State:Postal/Zip Code:	
Please state name, relationship a unit.	and ages of all eligible persons who will b	be occupying the
NAME	RELATIONSHIP	AGE
2		
4		
*5		
*6		

* --- Three (3) Bedroom Units only

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PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

Name:		Relation:	
Home Phone:		Cell Phone:	
Address:			
City:		State/Prov:Posta	ıl/Zip Code:
and shall have a the vehicle(s). P	Piper's Pointe Con ERMITS REMAIN 1	do Association issued parki THE PROPERTY OF THE ASS	
			Plate #:
State/Prov:	Color:	Model:	Permit #
Vehicle Owner			
Is this vehicle used	for commercial bu	usiness?	
Make/Model		Year:	Plate #:
State/Prov:	Color:	Model:	Permit #
Vehicle Owner			
Is this vehicle used	for commercial bu	isiness?	
motorcycles passengers,	, trucks (inclu vans with rac	•	vans not designed for der's compressors or
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commercial vehicles, vehicles used as commercial vehicles, trailers, 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. No vehicle of any kind in serious need of visual repair 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:

11. I understand and agree that lessee(s) and occupants are NOT allow	ved
to harbor any kind of pets and have complied with this provision	
during the term(s) of my lease. I acknowledged that I will be subje	ect
to prosecution for any violation of the laws of the State of Florida a	as.

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PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

they pertain to "Service and/or Emotional Support" animals.	
Acknowledged by signing here:	
, , ,	
	_

Signature

- 12. I understand and agree that the Association, in the event it approves this renewal of the 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:** ______
- 13. In order to facilitate consideration of this application, I represent that the preceding information is factual and correct and agree that any falsification or misrepresentation will justify its disapproval. I consent to the further inquiry of the Board of Directors of the Association and/or its agent. I am aware of and agree to abide by the Declaration of Rules and Regulations.

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

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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.

acknowledge this provision of the application by signing here:		
SIGNATURE OF LESSEE		
PRINTED NAME		
SIGNATURE OF CO-LESSEE		
PRINTED NAME		

Initial Here _____

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PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

This is executed as a sealed instrument, signed this		day of	in the
year	•		
Applicant:	Witness:		
Applicant:	Witness:		

APPLICATION PROTOCOL

The Lessee will be advised by the Association office within a thirty (30) 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.

RETURN THIS LEASE RENEWAL APPLICATION TO:

Pipers Pointe Condominium Association, Inc.

c/o Gulf Breeze Management Services of S W Florida, Inc. 8910 Terrene Court - Bonita Springs, FL 34135-9514

Tel: (239) 498-3311 FAX: (239) 498-4974

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PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC. FOR OFFICE USE ONLY

Notes:		
<u>Violations:</u>		
Legible Complete	ed Application	
Proof of HOA-4 In	nsurance Policy in full force and effect	
\$10.00 Annual Re	enewal Fee	
\$1,200.00 Securi	ty Deposit (Long Term Lease) Verified	
\$700.00 Security	Deposit (Seasonal Lease) Verified	
Date Received:	by:	G B M, Inc.
Forwarded to the BOD	on:	
to		
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PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

ACTION TAKEN BY THE BOARD OF DIRECTORS

Approved	Disapproved	Date:		
Board Member:			Office:	
COMMENTS O	F THE ASSOCIATION:			

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