

Park Shore Landings

CONDOMINIUM ASSOCIATION

c/o NextGen Community Management
9410 Corkscrew Palms Cir #201 Estero, FL 33928
PH: (239) 372-2996 | Email: office@nextgcm.com

APPLICATION FOR LEASE APPROVAL

SUBMIT APPLICATION AT LEAST 20 DAYS PRIOR TO OCCUPANCY.

Any application submitted less than 20 business days prior to the lease start date may have their occupancy delayed. Applicants may not move in until the Association has tendered official review of their lease, and further, moving in prematurely constitutes a ground for disapproval.

MUST INCLUDE:

- COMPLETED APPLICATION (separate applications must be completed for co-applicants (excludes married couples)).
- COPY OF EXECUTED LEASE CONTRACT
- \$100 NON-REFUNDABLE APPLICATION FEE MADE PAYABLE TO PARK SHORE LANDINGS CONDO ASSOC.
- 3 Personal REFERENCE LETTERS (Realtors may not be used as references)

*****Please do not submit partial packages. Applications are not considered received until all documentation is submitted. Incomplete applications will be reviewed and sent back. All fees are non-refundable. *****

Date _____ Address of Unit Being Rented _____

Lease Start Date: _____ Lease End Date: _____

Renter Information: Number of people to occupy unit _____

Applicant _____ Contact Phone # _____

E-mail _____

Applicant _____ Contact Phone # _____

E-mail _____

I wish to opt in to receive email communication from the Management office with the email address you have provided above.
Opt In: _____ Opt Out: _____ **You can opt out at any time through the email service provider.

Occupant(s)

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

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CONDOMINIUM ASSOCIATION

Vehicles:

Make/Model: _____ License Plate: _____ Year: _____ Color: _____

Make/Model: _____ License Plate: _____ Year: _____ Color: _____

Name of Current Owner _____

Name Leasing Agent (if any) _____

Agent Contact Info _____

In case of Emergency Notify:

1. Name _____ Address _____ Phone _____

2. Name _____ Address _____ Phone _____

The Managers and Members of the Board of Directors are available to answer any questions regarding the Governing Documents and Rules & Regulations that govern the Association. If you have any questions, please contact us prior to signing this application for occupancy.

I have received, read and agree to abide by the Declaration, By-Laws, Amendments, Articles of Incorporation and the Rules and Regulations of Park Shore Landings

I (we) further agree that in the absence of the owners, the Association is granted full power to take whatever action necessary, including eviction, to prevent or stop violations by lessees and their guests.

TENANTS MAY NOT HAVE PETS

Tenants Initials

The prospective tenant(s) understands that the Association or its manager may use the above application to perform a background, prior landlord, credit and police records check on the applicant(s) listed above. This information will be kept confidential and may be used to approve or disapprove the applicant(s).

Occupancy prior to Board of Directors approval is prohibited.

The tenant(s) will be advised by the Association's Management whether this application has been approved.

I/We certify that all of the above furnished information is true and accurate, should there be any discrepancies and/or false information provided, I understand that this application is null and void.

As required by law, this information is kept strictly confidential.

Applicant Signature: _____

Applicant Signature: _____



Park Shore Landings

CONDOMINIUM ASSOCIATION

Character Reference Form

Date: _____

Applicant's Reference's Name: _____

Street Address: _____

City, State, Zip: _____

Re: Applicant's Name: _____

Association Applying to: Park Shore Landings

To Whom It May Concern:

The applicant(s) names above is applying for membership in a Condominium Association in Southwest Florida. The Board of Directors would appreciate it if you would furnish us with whatever information you consider pertinent regarding the character and stability of the applicant(s).

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 purchase or lease. Thank for your assistance in this matter.

Yours truly,

Park Shore Landings Management

How do you know the applicant(s)? _____

For how long have you known the applicant(s)? _____

In your opinion, would the applicant(s) make a good neighbor? ____ Yes ____ No

Please describe the applicant(s) character and stability, as you know them: _____

Reference's Signature _____



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CONDOMINIUM ASSOCIATION

Character Reference Form

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Street Address: _____

City, State, Zip: _____

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