

**BAY WOODS CONDOMINIUM ASSOCIATION INC.
LEASE APPLICATION AND GUEST NOTIFICATION**

This application must be submitted with a nonrefundable processing fee of \$100.00 made payable to Bay Woods Condominium Association, Inc., c/o Vesta Property Services, 27180 Bay Landing Drive, Suite 4, Bonita Springs, FL 34135, (239) 947-4552, Fax (239) 495-1518, at least twenty (20) days prior to the start of any lease and at least seven (7) days prior to the arrival of any family or guests who will reside at Bay Woods for seven (7) days or longer, **if the owners are not at home during the visit. There is no application fee required with the notification of family or guests.**

NO NEW TENANTS MAY MOVE INTO BAY WOODS WITHOUT PRIOR APPROVAL OF THE BOARD OF DIRECTORS, AND NO LEASE MAY BE FOR LESS THAN A THIRTY-DAY (30) PERIOD. NO PETS ARE PERMITTED IN LEASED UNITS. PROSPECTIVE TENANTS MUST MEET WITH TWO BOARD MEMBERS PRIOR TO APPROVAL.

UPON BOARD APPROVAL AND PRIOR TO OCCUPANCY, TENANT(S) WILL PROVIDE A \$500.00 CHECK, MADE OUT TO BAY WOODS CONDOMINIUM ASSOCIATION, INC., TO BE HELD AS SECURITY DEPOSIT BY THE ASSOCIATION DURING THE LEASE TERM.

APPLICANT IS AN ACTIVE MEMBER OF THE UNITED STATES ARMED FORCES? ____ YES ____ NO

Unit No. _____ Owner _____

Owner Address _____

Owner's Phone _____ Owner's E-mail _____

Lease Term Dates: From _____ To _____

Lessee Information

Applicant Name _____

Date of Birth _____ Social Security No. _____

Spouse/Co-applicant Name _____

Date of Birth _____ Social Security No. _____

Present Address _____

Phone _____ E-mail _____

Will anyone other than those listed above occupy this unit on a regular basis? Yes _____ No _____

List all others who will occupy the residence on a regular basis. Provide birth dates and social security numbers for all occupants eighteen years of age or older.

Name _____

Date of Birth _____ Social Security No. _____

Name _____

Date of Birth _____ Social Security No. _____

Name _____

Date of Birth _____ Social Security No. _____

Name _____

Date of Birth _____ Social Security No. _____

Vehicles

Year/Make/Model/Color _____

Year/Make/Model/Color _____

References. Please provide names, addresses, and phone numbers of two personal references (not family members)

Name _____ Phone _____

Address _____

City/State/Zip _____

Name _____ Phone _____

Address _____

City/State/Zip _____

Emergency Contact

Name _____ Phone _____

Address _____

City/State/Zip _____

Relationship _____

Agent

Real Estate Company _____

Agent Name _____

Phone No. _____ E-mail _____

PLEASE READ THE FOLLOWING AND SIGN THIS APPLICATION

I have received and read a copy of the Bay Woods Condominium Association's Rules and Regulation and Use Restrictions. I understand the Rules & Regulations and Use Restrictions and agree to abide by them as long as I reside at Bay Woods Condominium. I understand that failure to do so could be cause for eviction.

Applicant's Signature _____ Date _____

Co-applicant's Signature _____ Date _____

Approval

Association Manager _____ Date _____

Board Member _____ Date _____

If application is denied, give reason _____

Tenant Code of Conduct Acknowledgement

- Units are to be used for residential purposes only, as single-family residences. Commercial activities, including yard and garage sales, are strictly prohibited.
- Tenants are not permitted to keep dogs or cats within units.
- Vehicles are prohibited from parking in streets overnight. Any commercial vehicles must be parked in garages. Street parking is prohibited past 1:00 a.m.
- Apart from times of ingress and egress, garage doors are to remain closed.
- Lanais are to be kept clean, and used only for their intended purposes. Lanais are not to be used as storage facilities.
- Trucks, Boats, trailers, recreational vehicles, and motor homes are not permitted to be parked in driveways.
- Any activities which may cause foul or obnoxious odors to be emitted outside of the dwelling, or create noise or other conditions which tend to disturb the peace or threaten the safety of others are strictly prohibited.
- Any activities which violate local, state, and/or federal laws are prohibited.
- Posting or maintaining of any sign, banner, or advertisement is prohibited.
- Swimming or boating in community lakes is prohibited.
- Feeding of alligators or other wildlife is strictly prohibited.
- Trapping or killing of wildlife is prohibited.
- Satellite dishes only may be installed on lanais, with approval from the Bay Woods Board of Directors, via applications submitted by property owners.
- No exterior modifications to units are permitted without prior written consent from the Board of Directors.
- Residents are encouraged to keep all garbage and recycling receptacles within their garages other than times preceding/subsequent to pick up.
- Residents should not store personal items outside of their dwelling, except within lanais.
- Per local fire code, propane and charcoal grilling is prohibited within lanais. Propane storage is prohibited anywhere within a unit.
- Per Lee County Department of Health Code, pool and spa hours are from dawn to dusk. By signing below, applicant(s) acknowledge they understand and agree to adhere by the use restrictions as stated above, as well as all other covenants governing the Shadow Wood Preserve Bay Woods Condominium Association, Inc. and Shadow Wood Preserve Community Association, Inc.

Tenant #1 Signature: _____ Date: _____

Printed Name: _____

Tenant #2 Signature: _____ Date: _____

Printed Name: _____



27180 Bay Landing Drive, Suite 4
Bonita Springs, FL 34135
239-947-4552, f 239-495-1518
info@vestapropertyservices.com

VestaPropertyServices.com/sw

**AUTHORIZATION FOR RELEASE OF INFORMATION FOR
TENANT SCREENING PURPOSES**

Background Screening Disclosure

I hereby authorize Vesta Property Services and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for tenant screening purposes. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to the following areas: criminal history records (from local, state, federal, international and other law enforcement agencies records), sexual offender’s lists, wants and warrants records, credit history, and civil/law suit cases. Upon request Vesta Property Services will supply a copy of the completed consumer report along with a copy of an individual’s rights under the Fair Credit Reporting Act.

Authorization and Release

I _____, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. I hereby release Vesta Property Services and its agents, officials, representatives, assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family or associates because of compliance with this authorization and request to relapse. I certify that all information provided below and on my application is correct to the best of my knowledge. Any false statements provided in this form and my application will be considered just cause for disqualification at any time. This authorization and consent shall be valid in original, fax, or copy form. The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

Applicant’s Name (Print Legibly) Maiden/AKA/Previous Name (s)

Signature

_____/_____/20_____
Date

Social Security Number

_____/_____/_____
Date of Birth

Driver License Number State

Current Address

(_____) _____
Phone



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