



VERANDAH COMMUNITY ASSOCIATION, INC.

APPLICATION FOR APPROVAL TO LEASE

This application must be submitted by the Unit Owner along with the required enclosures and a \$100.00 non-refundable application fee, no less than twenty (20) days prior to occupancy to allow for processing time. The Unit Owner agrees to pay a non-refundable expedited application fee of \$200 for all applications submitted less than twenty (20) days prior to occupancy. Application must be received at least ten (10) days prior to occupancy. Please note that, per the terms of the Governing Documents specific to the Neighborhood where the Unit is being leased, your home or Unit can only be rented, depending upon the Neighborhood, a total of two or three times within a calendar year, and for a term of no less than 30 days.

For all lease extensions and lease renewals, a new lease application must be filled out, signed and submitted at least ten (10) days prior to the expiration of the lease. A new lease or an addendum to the original lease must be submitted as well. The application fee is waived for all extensions and renewals filed and approved PRIOR to the expiration of the original lease.

Unit Address: _____ Lot / Unit # _____

Current Owner of Record: _____

Term of Lease: For the period Beginning: _____ Ending: _____

As the owner of the Unit, please list your mailing address and phone number for all correspondence with the Verandah Community Association ("VCA") and/or Neighborhood Associations.

Owner's Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____ E-Mail: _____

I AGREE THAT THE ASSOCIATION, IN THE EVENT IT APPROVES THIS LEASE, IS AUTHORIZED TO ACT AS MY AGENT WITH FULL POWER AND AUTHORITY TO TAKE WHATEVER ACTION MAY BE REQUIRED TO PREVENT VIOLATIONS BY LESSEES AND THEIR GUESTS OF PROVISIONS OF THE RULES AND REGULATIONS OF THE VERANDAH COMMUNITY ASSOCIATION AND ANY NEIGHBORHOOD ASSOCIATION.

Signature of Homeowner or Rental Agent on behalf of Homeowner: _____

Date: _____

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

Lessee Information

The undersigned prospective Lessee hereby makes application for approval to lease in the Neighborhood indicated on page 5 and page 6 below and agrees to abide by all Rules and Regulations and Covenants of the Verandah Community Association as well as any applicable Neighborhood Association. The applicant(s) represent that the following information is true and correct and consent to further investigation concerning this information or any information which comes from that inquiry which is necessary for approval of this request.

Persons who will occupy the above Residence are as follows:

Lessee Name: _____

Date of Birth: _____ SSN: _____

Co-Lessee Name: _____

Date of Birth: _____ SSN: _____

Lessee's Current Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Cell Phone: _____ Email: _____

Previous Landlord: _____ Phone number: _____

Current or Last Employer: _____

How Long: _____ Position: _____

Employer address: _____ Phone: _____

Others who will occupy the unit:

<u>Name</u>	<u>Relationship</u>	<u>DOB</u>
_____	_____	__/__/____
_____	_____	__/__/____
_____	_____	__/__/____
_____	_____	__/__/____

NOTE: Occupancy is restricted to the residential, non-business use of a Unit by one person or a single household as these terms are defined in the Verandah Community Association Use Restrictions.

Lessee Information (continued)

Automobile Information

	<u>Make</u>	<u>Model</u>	<u>Year</u>	<u>Color</u>	<u>License Plate</u>	<u>State</u>
Auto #1:	_____	_____	_____	_____	_____	_____
Auto #2:	_____	_____	_____	_____	_____	_____

NOTE: *Please refer to the Verandah Community Association and if applicable, Neighborhood Association documents for Vehicle and Parking restrictions. Violations of Parking Restriction rules and regulations may lead to lease termination and eviction.

Pet Information

Pet #1: Pet's Name: _____ Type: _____ Breed: _____ Weight: _____
Pet's License # _____ State: _____ Date: _____
Rabies Vaccination Date: _____

Pet #2: Pet's Name: _____ Type: _____ Breed: _____ Weight: _____
Pet's License # _____ State: _____ Date: _____
Rabies Vaccination Date: _____

NOTE: Please refer to the Verandah Community Association and if applicable, Neighborhood Association documents for Animal, Pet and Noise restrictions.

Persons to be notified in Case of Emergency:

Name: _____ Phone No: _____

Name: _____ Phone No: _____

*The Unit owner is responsible to provide you with copies of all Verandah Community Association and if applicable, Neighborhood Association documents. If your vehicle is one that requires it be garaged it is your responsibility to ascertain that you can do so or risk being denied a vehicle access sticker.

Tenant/Applicant Representations:

1. I am aware of, and agree to abide by and be bound by the Declaration of Covenants, Conditions and Restrictions for Verandah, and any applicable Supplemental Declarations, the By-Laws, the Use Restrictions and the Rules and Regulations (collectively the "Governing Documents" for purposes of this Lease Application) of Verandah and any applicable Neighborhood Association. It is the Owner's obligation to make these Governing Documents available to me. My signature acknowledges: (i) my receipt of these Governing Documents; and (ii) my concurrence that they have been read in their entirety and understood by me before entering into any agreement for the rental of the above Unit and before the execution of this application form; and (iii) my agreement to comply with all Governing Documents as written. I FURTHER UNDERSTAND AND AGREE THAT THE VERANDAH COMMUNITY ASSOCIATION ("VCA") OR NEIGHBORHOOD ASSOCIATION, IN THE EVENT IT APPROVES A LEASE, IS AUTHORIZED TO ACT AS THE OWNER'S AGENT WITH FULL POWER AND AUTHORITY TO TAKE WHATEVER ACTION MAY BE REQUIRED TO PREVENT VIOLATIONS BY LESSEES AND THEIR GUESTS OF PROVISIONS OF THE RULES AND REGULATIONS OF THE VCA AND/OR ANY NEIGHBORHOOD ASSOCIATION.
2. I ACKNOWLEDGE THAT I MAY NOT OCCUPY THE PREMISES PRIOR TO RECEIVING APPROVAL TO DO SO FROM THE VCA AND/OR AUTHORIZED NEIGHBORHOOD ASSOCIATION.
3. IF, AT ANY TIME DURING THE TERM OF MY LEASE, THE UNIT OWNER BECOMES DELINQUENT IN THE PAYMENT OF ASSESSMENTS TO THE VCA OR NEIGHBORHOOD ASSOCIATION EITHER ASSOCIATION MAY MAKE A DEMAND UPON ME AND I WILL FORWARD ALL RENT PAYMENTS AFTER THE DATE OF THE DEMAND TO THE ASSOCIATION UNTIL THE ASSESSMENTS ARE PAID IN FULL, PURSUANT TO FLORIDA STATUTES SECTION 720.3085.
4. MY SIGNATURE AUTHORIZES THE VCA AND/OR NEIGHBORHOOD ASSOCIATION TO OBTAIN ANY AND ALL BACKGROUND INFORMATION RELATING TO ME AND FURTHER AUTHORIZES ANY AND ALL OF THE MY CREDITORS AND CREDIT BUREAUS TO RELEASE ANY AND ALL OF MY CREDIT HISTORY TO THE VCA AND/OR NEIGHBORHOOD ASSOCIATION.
5. I AUTHORIZE THE RELEASE OF ANY OF THE INFORMATION INCLUDED IN THIS APPLICATION TO ANY TAXING AUTHORITY REQUESTING IT.
6. MY SIGNATURE CERTIFIES THAT ALL THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT AND THAT THE OCCUPANCY OF THE ABOVE UNIT IS BASED UPON THE ACCURACY OF SAID INFORMATION AND THAT REMOVAL PROCEEDINGS MAY RESULT AGAINST ME AND ALL OTHER OCCUPANTS OF THE UNIT SHOULD IT BE ESTABLISHED THAT ANY OF SAID INFORMATION IS NOT TRUE AND CORRECT.

SIGNATURE OF APPLICANT: _____ DATE: _____

SIGNATURE OF CO-APPLICANT: _____ DATE: _____

SIGNATURE OF UNIT OWNER

Or REAL ESTATE AGENT: _____ DATE: _____

Name of Real Estate Company: _____

Address of Real Estate Agent: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

The following items MUST be included at the time the application is submitted for approval. An incomplete Packet will cause delays in processing.

- Fully Completed Application For Approval To Lease
- Copy of Executed Lease
- \$100.00 NON-REFUNDABLE Application Fee if submitted prior to the twenty (20) day requirement; \$200 NON-REFUNDABLE Expedited Application Fee if submitted less than twenty (20) days prior to occupancy. Applications must be submitted at least ten (10) days prior to occupancy. Make checks payable to:

Verandah Community Association 12201 River Village Way, Fort Myers, FL 33905 for these Neighborhoods:

- Arlington Oaks
- Brantley Oaks
- Cedar Hammock
- Cypress Marsh
- Hammock Creek
- Oak Bend
- Mossy Oak
- River Point
- Sanctuary Point
- Shadetree Point
- Whispering Oaks

Vesta Property Services, 27180 Bay Landing Dr. Ste #4, Bonita Springs, FL 34135 for these Neighborhoods:

- Citrus Creek
- Idlewild
- Orangetree Bend
- Cottonwood Bend
- Sabal Point

Omni Management, 27499 Riverview Center Blvd, Suite 134, Bonita Springs, FL 34135 for these Neighborhoods:

- Shady Bend

R & P Property Management, 5629 Strand Blvd. #412, Naples, FL 34110 for these Neighborhoods:

Lakeview

Vision Associate Management, 11691 Gateway Blvd, Fort Myers, FL 33913 for these Neighborhoods:

Otter Bend

S.W. Property Management, 1044 Castello Dr. Suite 206, Naples FL 34103 for these Neighborhoods:

Palmetto Grove

Vesta Property Services, 8141 54th Avenue North, St. Petersburg, FL 33709 for these Neighborhoods:

Pebblebrook

ACTION OF THE BOARD/AGENT

APPROVED: _____ DISAPPROVED: _____ DATE OF DECISION: _____

BY: _____ Title: _____



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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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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Bonita Springs, FL 34135
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TRoppe@vestapropertyservices.com

www.VestaPropertyServices.com/sw

Additional Requirements to Verandah Lease Application

Effective Date: July 2017

- **All** lease renewals require a new application, regardless if seasonal or an annual lease.
- All checks are to be written to the association, not the management company.
- Condominiums can only charge \$100 for an application (which includes the background checks) and cannot charge for annual lease renewals.
- Condominiums can charge for seasonal renewals of \$100.
- Each HOA may differ in charges. (An HOA is different than a condominium).

Citrus Creek

- \$150 Application Fee (includes two background checks)
- \$30 for each additional applicant over 18 years of age
- \$100 annual renewal fee
- \$100 lease renewal fee

Sabal Point

- \$130 Application fee (includes two background checks)
- \$30 for each additional applicant over 18 years of age
- \$100 Application fee for annual renewals
- \$100 Application fee for seasonal renewals
- Irrigation water is to be paid by the owner and stated in the lease

Cottonwood Bend

- No Pets allowed for renters
- Handbook must be read, garages used for automobiles
- \$100 application fee, no fee for renewals
- \$100 for seasonal renewal applications

Idlewild

- \$100 application fee, no fee for renewals
- \$100 for seasonal renewal applications
- Rules and Regulations must be read. All trucks parked in the garage in the evening

Tina Roppe, CAM TRoppe@vestapropertyservices.com or 239-947-4552