

**OAKWOOD II AT GRANDEZZA CONDOMINIUM ASSOCIATION INC.**

c/o: Vesta Property Services  
27180 Bay Landing Dr., Ste. 4  
Bonita Springs, FL 34135  
☎ 239-947-4552  
Fax: 239-495-1518

TO: The Board of Directors of Oakwood II at Grandezza, a Condominium.

**CURRENT OWNER NAME:** \_\_\_\_\_

(Please check appropriate box below)

I hereby apply for approval to **purchase** unit \_\_\_\_\_ at \_\_\_\_\_ in Oakwood at Grandezza, a Condominium, and for membership in the Condominium Association. **A complete copy of the signed purchase agreement is attached.**

I hereby apply for approval to **lease** unit \_\_\_\_\_ in \_\_\_\_\_ in Oakwood at Grandezza, a Condominium, for the period beginning \_\_\_\_\_ 200\_\_\_\_, and ending \_\_\_\_\_, 200\_\_\_\_. **A complete copy of the signed lease is attached.**

**NOTE:** A Non-refundable application fee of **\$100.00** must be included with completed application, for purchase. A non-refundable application fee of **\$50.00** must be included for a lease. Make check payable & mail to: Oakwood II at Grandezza Condominium Association c/o: Vesta Property Services, 27180 Bay Landing Dr. Ste. 4, Bonita Springs, FL 34135.

In order to facilitate consideration of this application, I represent that the following information is factual and correct, and agree that any falsification or misrepresentation in this application will justify its disapproval. I consent to your further inquiry concerning this application, particularly of the references given below.

**PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION**

**APPLICANT IS AN ACTIVE MEMBER OF THE UNITED STATES ARMED FORCES? \_\_ YES \_\_ NO**

1. Full name of Applicant(s) \_\_\_\_\_

2. Full name of Spouse (if any) \_\_\_\_\_

Home address \_\_\_\_\_

Phone Home \_\_\_\_\_ Office \_\_\_\_\_

3. Nature of Business or Profession \_\_\_\_\_

*If retired, former business or profession* \_\_\_\_\_

4. Company or Firm Name \_\_\_\_\_

5. Business Address \_\_\_\_\_ Phone \_\_\_\_\_

6. **ALL UNITS IN OAKWOOD II ARE TO BE USED AS SINGLE FAMILY RESIDENCES ONLY.**  
**Please state the name and relationship of all other persons who will be occupying the unit on a regular basis.**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

**7. Name of current or most recent landlord** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City/State/Zip** \_\_\_\_\_ **Phone** \_\_\_\_\_

**8. Two personal references (local if possible)**  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

**9. Person to be notified in case of emergency:**  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

**10. Make of car to be kept at the Condominium:**  
Model/Make \_\_\_\_\_ Year \_\_\_\_\_  
License No. \_\_\_\_\_ State \_\_\_\_\_

**11. Mailing address for notices connected with this application:**  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

**12.** (If this transaction is a **sale**, please circle the number that applies), I am purchasing this unit with the intention to:

(1) reside here part-time (2) reside here on a full-time basis (3) lease the unit

I (we) will provide the Association with a copy of our recorded deed within ten (10) days after closing.

**13. I am aware of, and agree to abide by the Declaration of Condominium for Oakwood II at Grandezza, a condominium, the Articles of Incorporation, By-laws and any and all properly promulgated rules and regulations. I acknowledge receipt of a copy of the Association rules.**

**14.** I understand and agree that the Association, in the event it approves the **lease**, is authorized to act as the owner's agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by lessees and their guests, of provisions of the Declaration of Condominium of Oakwood at Grandezza Association's by-laws, and the rules and regulations of the Association.

**AUTHORIZATION: I/We hereby authorize Vesta Property Services, LLC and/or Oakwood at Grandezza Condominium Association to verify all information contained on the application and conduct a full background check, including but not limited to credit, employment, income, eviction, and criminal and authorize that they contact any persons or companies listed on the application.**

DATED: \_\_\_\_\_  
Applicant

Applicant



APPLICATION APPROVED



DISAPPROVED

DATE: \_\_\_\_\_

BY: \_\_\_\_\_