

**PROFESSIONAL COURT ASSOCIATION, INC.**

RENTAL/LEASE APPLICATION

I/We, hereby apply for approval to rent/lease unit # \_\_\_\_\_ at \_\_\_\_\_ Bonita Bay Boulevard

for the period beginning \_\_\_\_\_ 20\_\_\_\_, and ending \_\_\_\_\_ 20\_\_\_\_ .

**A copy of the lease/rental agreement must accompany the application along with the application fee of \$100.00.** Check to be made payable to Professional Court Condominium Association, Inc. and sent to Vesta Property Services 27180 Bay Landing Drive, Suite 4, Bonita Springs, FL 34135.

Rental/lease requirement – 30 day minimum.

*PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:*

1. Full name of applicant \_\_\_\_\_

2. Home address \_\_\_\_\_  
Street address City, State and Zip code

3. Telephone: Home \_\_\_\_\_ Office \_\_\_\_\_

4. Business or Profession: \_\_\_\_\_

5. Company or Firm Name: \_\_\_\_\_

6. Two personal references (local preferred):

Name \_\_\_\_\_ Address \_\_\_\_\_

City, State and Phone \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City, State and Phone \_\_\_\_\_

8. Person to be notified in case of emergency: \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

10. **Approval of this application will be sent to the owner who is to provide a copy to the renter/lessee.** Owner mailing address for billings and notices connected with application.

\_\_\_\_\_  
Name Address City, State and Zip

11. Rental Agent/Company: \_\_\_\_\_  
Phone

Lease application

12. I acknowledge receipt of, and agree to abide by the Association Rules and Regulations. \_\_\_\_\_  
Initials

13. I understand and agree that the Association, in the event it approves this rental/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 Association Rules and Regulations. \_\_\_\_\_  
Initials

**Authorization: I/We hereby authorize Vesta Property Services, LLC and/or Professional Court Condominium Assoc, Inc. to verify all information contained on this 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 this application.**

**Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

Have you attached:     Signed application     Copy of Lease     2 references  
                                   Processing fee (\$100 – Professional Court Condominium Assoc., Inc.)

Mail to:            Professional Court Condominium Association, Inc.  
                          c/o Vesta Property Services  
                          Attn: Alden K. Williams, Property Manager/CAM  
                          27180 Bay Landing Drive, Suite 4  
                          Bonita Springs, FL 34135    239 947-4552    239 495-1518 Fax  
                          Email: [AWilliams@Vestapropertyservices.com](mailto:AWilliams@Vestapropertyservices.com)

(    ) **Application approved**                      (    ) **Application disapproved**

\_\_\_\_\_  
**Director or Agent**

\_\_\_\_\_  
**Date**