

**SUMMERLIN WOODS CONDOMINIUM ASSOCIATION, INC.**

*“A Multi-Association, Limited Access, Gated Community"*

Office: Executive Suites at World Plaza

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**LEASE APPLICATION**

**(REVISION L) (3 MONTH MINIMUM / 9 MONTH MAXIMUM LEASE PERIOD)**

**(PLEASE TYPE OR PRINT)**

**UNIT OWNER NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**UNIT ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**START DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ENDING DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**LEE COUNTY TAX ID NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FLORIDA STATE TAX ID NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(A) LESSEE NAME (PRIMARY NAME ON LEASE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(A) LESSEE (DOB \_\_\_\_\_\_\_\_\_\_\_ (SS#)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(DL#)\_\_\_\_\_\_\_\_\_\_\_\_\_(ST)\_\_

CURRENT ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY\_\_\_\_\_\_\_\_\_STATE\_\_\_\_ZIP\_\_\_

PRIOR ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY\_\_\_\_\_\_\_\_\_STATE\_\_\_\_ZIP\_\_\_

EMAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT # WORK (\_\_\_)\_\_\_\_\_\_\_\_\_\_ HOME(\_\_\_)\_\_\_\_\_\_\_\_ CELL(\_\_\_)\_\_\_\_\_\_\_\_\_\_

OCCUPATION & POSITION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_#YRS.\_\_\_\_\_

EMPLOYED BY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(B) LESSEE NAME (ADDITIONAL NAME ON LEASE**)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(B) LESSEE DOB)\_\_\_\_\_\_\_\_\_\_\_\_(SS#)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(DL#)\_\_\_\_\_\_\_\_\_\_\_\_(ST)\_\_\_

CURRENT ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_ZIP\_\_\_\_

PRIOR ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_ZIP\_\_\_

EMAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT # WORK (\_\_\_)\_\_\_\_\_\_\_\_\_HOME (\_\_\_)\_\_\_\_\_\_\_\_\_CELL(\_\_\_)\_\_\_\_\_\_\_\_\_\_\_

OCCUPATION & POSITION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_#YRS.\_\_\_\_\_\_

EMPLOYED BY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**ADDITIONAL RESIDENT / OCCUPANT INFORMATION**

(LIMIT 2 ADULTS PER BEDROOM) (LIST ALL ADDITIONAL PERSONS THAT WILL OCCUPY THIS UNIT)

(NAME & RELATIONSHIP) (IDENTIFY IF RESIDENT IS UNDER 18YRS OF AGE)

1.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VEHICLE INFORMATION** (LIMIT 2 PER UNIT BY PERMIT ONLY)

(OPEN- BED TRUCKS, MOTORCYCLES, WATERCRAFT & TRAILERS ARE PROHIBITED ON PROPERTY FOR RESIDENTS & GUESTS)(SEE DOCUMENTS, RULES & REGULATIONS)

(YR)\_\_\_\_(MAKE/MODEL)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(2/4DR)\_\_\_\_\_

(CAR/TRUCK/SUV)\_\_\_\_\_\_\_\_\_\_\_(COLOR)\_\_\_\_\_\_(LIC/TAG#)\_\_\_\_\_\_\_\_\_\_\_\_\_(ST)\_\_

(YR)\_\_\_\_(MAKE/MODEL)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(2/4DR)\_\_\_\_\_(CAR/TRUCK/SUV)\_\_\_\_\_\_\_\_\_\_\_(COLOR)\_\_\_\_\_\_(LIC/TAG#)\_\_\_\_\_\_\_\_\_\_\_\_\_(ST)\_\_

**PET INFORMATION:**

**( NO PETS ALLOWED FOR TENANTS / NO VISITING PETS ALLOWED FOR GUESTS)**

**PERSONAL REFERENCE & EMERGENCY CONTACT**

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_RELATIONSHIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY\_\_\_\_\_\_\_\_\_\_\_ST\_\_\_ZIP\_\_\_

DAY PHONE (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_NIGHT PHONE (\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_

**LEASING AGENT INFORMATION:**

LEASED BY OWNER\_\_\_REALTOR \_\_\_\_OTHER\_\_\_\_\_

AGENT NAME & PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGENT COMPANY NAME & ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**APPLICANT AGREEMENT & CONSENT**

APPLICANTS DO HEREBY AGREE AND CONSENT THAT THE ASSOCIATION MAY REQUEST

AND OBTAIN ADDITIONAL INFORMATION THAT THE ASSOCIATION DEEMS NECESSARY IN THE PROCESSING OF THIS APPLICATION INCLUDING BUT NOT LIMITING TO THE ENGAGEMENT OF THE SERVICES OF AN INDEPENDENT INVESTIGATIVE SERVICE FOR A CONFIDENTIAL CRIMINAL BACKGROUND REPORT.

**$100.00 PER APPLICATION PROCESSING FEE (NON-REFUNDABLE)**

**( limit two names per application)**

**$65.00 BACKGROUND INVESTIGATION FEE (PER ADULT RESIDENT OCCUPANT OVER THE AGE OF 18YRS) (NON-REFUNDABLE)**

THE PROPER FEE MUST BE SUBMITTED WITH THIS APPLICATION PRIOR TO PROCESSING. MAKE CHECK PAYABLE TO: **SUMMERLIN WOODS CONDOMINIUM ASSOCIATION INC.**

**ACKNOWLEDGMENT**

APPLICANTS HEREBY ACKNOWLEDGE RECEIPT OF THE ASSOCIATION DOCUMENTS AND ALL AMENDMENTS THERETO, A COPY OF THE RULES AND REGULATIONS AND AGREE THEY AND THEIR GUESTS WILL FULLY COMPLY WITH SAME. APPLICANTS HEREBY ACKNOWLEDGE THAT **NO PETS, MOTORCYCLES, BOATS, TRAILERS ETC. WILL BE BROUGHT UPON THE ASSOCIATION PROPERTY BY THEIR GUESTS OR INVITEES**.

APPLICANTS HEREBY CERTIFY AND SWEAR THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE TO DATE TO THE BEST OF THEIR KNOWLEDGE.

**NOTE: THIS APPLICATION MUST INCLUDE:**

**REQUIRED SIGNATURES,**

**SIGNED COPY OF LEASE,**

**PROPER FEE FOR APPLICATION AND BACKGROUND CHECK**

**COPY OF DRIVER LICENSE FOR ALL ADULT RESIDENT OCCUPANTS)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**DATE**\_\_\_\_\_\_\_\_**

SIGNATURE (OWNER/AGENT)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_

SIGNATURE APPLICANT (A) (PRIMARY NAME ON LEASE)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_

SIGNATURE APPLICANT (B) (SECONDARY NAME ON LEASE)

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