



3409 Del Prado Blvd. Ste 101 Cape Coral, FL 33904 239-541-5570

SEND TO: rentals@sunshinerentals-leecounty.com

Referral Form Prospective Property Owner or Prospective Tenant

Referred by: _____ Date Submitted: _____

Company: _____ Agent Telephone _____

Mailing Address: _____

Agent email address: _____

Property Address: _____

Property Description:

Bedrooms: _____ Baths: _____ Garage: _____

Waterfront: _____ Pool: _____ Amenities _____

Prospective Owner Name:

Prospective Owner Email Address:

Owner Phone: _____

Tenant Prospect Name: _____

Prospect Phone: _____ Email _____

Comments:

Referral Fees are as follows:

*Vacant property coming into program is \$600 once it is rented by us and they move in
OR*Tenant placement if we place a tenant but do not put property in our management
program \$300 once they move in *Occupied property coming into program is

\$200*Tenant referral once they move into one of our properties is \$125

Referral paid _____ Date _____ Check # _____