

Wellington North at Bay Park Homeowners Association, Inc.

Single Family Home Rental Application

Email: jmonahan@mgmt-assoc.com Mail: 720 Brooker Creek Blvd, #206,

Oldsmar, FL 34677

Application must be filled in completely to be approved.

Date _____

Address of Rental Property _____

Owner Name _____

Owner Mailing Address _____

Owner Home Phone Number _____ Owner Business Phone Number _____

Owner Fax Number _____ Owner Email Address _____

Length of Rental _____ Dates of Rental _____

APPLICANT 1 INFORMATION

Name _____ Social Security Number _____ - _____ - _____

Birthday (MM-DD-YYYY) _____ Driver's License/State ID Number _____

Present Address _____ How Long? _____

Previous Address _____ How Long? _____

Phone # (H): _____ (B): _____ Email: _____

Married _____ Spouse's Name _____

Children? _____ How Many? _____ Ages? _____

Pets? _____ How Many? _____ What Kind? _____

Employer _____

Employer Address _____

Supervisor _____ Business Phone _____

How Long on Present Job _____

APPLICANT 2 INFORMATION

Name _____ Social Security Number _____ - _____ - _____

Birthday (MM-DD-YYYY) _____ Driver's License/State ID Number _____

Present Address _____ How Long? _____

Previous Address _____ How Long? _____

Phone # (H): _____ (B): _____ Email: _____

Married _____ Spouse's Name _____

Children? _____ How Many? _____ Ages? _____

Pets? _____ How Many? _____ What Kind? _____

Employer _____

Employer Address _____

Supervisor _____ Business Phone _____

How Long on Present Job? _____

REFERENCES (include name, address and phone numbers)

Wellington North Member Reference

Personal References _____

Do you intend to operate a business from the home? _____ If so, what kind? _____

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Email: clanzilottavaras@mgmt-assoc.com **Mail:** 720 Brooker Creek Blvd, #206,

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Do you own a commercial vehicle? _____ Describe _____

Do you own a recreation vehicle? _____ Describe _____

Please be aware of the following:

- All units are single-family residences.
- RV's, commercial vehicles, boats, trailers, etc...are NOT allowed on the premises.
- Wellington North at Bay Park is a Deed Restricted Community.
- All Lease Agreements shall be in writing.
- **All Lease Agreements, together with an application signed by both the Owner and Tenant, in a form approved by the Association, shall be submitted to Association for approval at least seven (7) days prior to the commencement of the lease term and shall require the written approval of Association.**
- The Owner shall pay the lease application fee of **\$100 per person over the age of 18** who intends on residing on the property as prescribed by the Association. Lease application fees may change from time to time.
- **Moving in a tenant prior to application approval is grounds for tenant eviction and homeowner fine.**
- No Lease Agreement may be for a term of less than six (6) months or greater than one (1) year.
- No home may be leased more than two (2) times in any calendar year.
- The Owner shall agree to remove, at the Owner's sole expense, by legal means, including eviction, his or her tenant should the tenant refuse or fail to abide by and adhere to the Rules and Regulations and any other policies adopted by the Association.
- All Lease Agreements shall require the home to be used solely as a private single family residence.
- All properties in the association are for non-commercial use only.
 1. A commercial business is the use of premises for any retail trade, service, professional, office, amusement, entertainment, or similar purpose. Any of these instances must be intended for financial gain as defined in the county zoning ordinance or county code of laws.

I understand that as a Lessee, I have received and read a copy of the Rules and Regulations, Covenants, Conditions and Restriction of the Association and agree to be bound by these Association Documents. A copy of which can be found at <http://www.wellingtonnorth.org/>

I understand and give my permission for a comprehensive criminal background check.

Rental Applicant 1's Signature Date Rental Applicant 2's Signature Date

Homeowner's Signature Date

Association Use Only

\$100.00 fee received? _____ Date _____ Check # _____

Rental Application Approved Yes No

Signature of Authorized Agent Approving Application

DATE _____

CUSTOMER NUMBER _____

TENANT INFORMATION FORM

I / We _____, prospective
tenant(s) / buyer(s) for the property located at _____,

Managed By: _____ Owned By: _____,

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / we understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I / we cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY**TENANT INFORMATION:**

SINGLE _____ MARRIED _____

SOCIAL SECURITY #: _____

FULL NAME: _____

DATE OF BIRTH: _____

DRIVER LICENSE #: _____

CURRENT ADDRESS: _____

HOW LONG? _____

LANDLORD & PHONE: _____

PREVIOUS ADDRESS: _____

HOW LONG? _____

EMPLOYER: _____

OCCUPATION: _____

GROSS MONTHLY INCOME: _____

LENGTH OF EMPLOYMENT: _____

WORK PHONE NUMBER: _____

HAVE YOU EVER BEEN ARRESTED?
(CIRCLE ONE) YES NO

HAVE YOU EVER BEEN EVICTED?
(CIRCLE ONE) YES NO

SIGNATURE: _____

PHONE NUMBER: _____

SPOUSE / ROOMMATE:

SINGLE _____ MARRIED _____

SOCIAL SECURITY #: _____

FULL NAME: _____

DATE OF BIRTH: _____

DRIVER LICENSE #: _____

CURRENT ADDRESS: _____

HOW LONG? _____

LANDLORD & PHONE: _____

PREVIOUS ADDRESS: _____

HOW LONG? _____

EMPLOYER: _____

OCCUPATION: _____

GROSS MONTHLY INCOME: _____

LENGTH OF EMPLOYMENT: _____

WORK PHONE NUMBER: _____

HAVE YOU EVER BEEN ARRESTED?
(CIRCLE ONE) YES NO

HAVE YOU EVER BEEN EVICTED?
(CIRCLE ONE) YES NO

SIGNATURE: _____

PHONE NUMBER: _____

TENANT CHECK HOURS OF OPERATION:**MONDAY - FRIDAY : 9:00 a.m. - 5:30 p.m.****SATURDAY : 11:00 a.m. - 4:00p.m.**

ALL ORDERS RECEIVED AFTER 5:00 p.m. (3:30 p.m. on Sat.) WILL BE PROCESSED THE
NEXT BUSINESS DAY

TENANT CHECK FAX #: (727) 942-6843

**IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A
SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE
REPORT.**

A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR
REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES /
MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS