PROPERTY RENTAL PACKAGE

Dear Tropic Isles Owner:

The following documents are required to be submitted to the office prior to renting your property in Tropic Isles:

1. Tenant Registration Form – to be completed by owner
2. Background application – to be completed by each individual tenant(s)
    a. Background application fee of $75 to be submitted at time of application
3. Photo identification for all renters
4. Pet registration (if tenant will have pets)
5. For RV Lots: If tenant is bringing their own RV, the RV and its placement must be approved by the ARC Committee. Please submit an ARC RV Approval & Placement application with the required documentation. ***Note: Tenant's background application will not be processed until after the RV is approved by the ARC Committee.***

All forms must be completed and submitted to the office at least 14 days prior to tenant's occupancy.

All tenants must comply with the residency restrictions contained in the Rules & Regulations. Please note that failure to obtain Co-Op approval of tenant prior to tenant's occupancy will result in a penalty of $250.00 charged to owner's account.

**Please note that you are required to provide your tenants with access FOBs should you wish them to have access to the amenities. The Co-Op will not issue FOBs to your tenants. You are responsible for the acts of your tenants while on the Co-Op common areas.

If you have any questions, please contact the office at 941-721-8888 or by email to info@tropicisles.net

Tropic Isles CO-OP, INC.

Property Address:

_____

Received: _____

Approved: _____

RV Approval: _____

TENANT REGISTRATION FORM

This form must be completed by owner/landlord

Property Address: _____

Owner Information:

Owner name: _____

Owner mailing address: _____

_____

Telephone: _____ Email: _____

Tenant Information:

Tenant #1

Name: _____

Telephone: _____

Email:_____

Tenant #2

Name: _____

Telephone:_____

Email:_____

Tenant's mailing address (if other than the property address): _____

_____

Do you give tenant permission to have pet(s) in the home? Yes No *(circle one)*
(max 2 pets per household, 30lbs max per pet)

I would like the tenant(s) to also receive copies of compliance notices: Yes No *(circle one)*

Lease Information: *(minimum lease term 30 days)*

Lease start date: _____ Lease end date: _____

Check one:

_____Renewal of existing Lease (tenant must be the same as previous lease)

_____New Lease registration (new tenant not previously reported at this property

_____RV Lot – Tenant is placing their RV on Lot. Submit ARC for RV approval and placement.

By signing below, I acknowledge the following:

1. I am granting tenant(s) permission to use the amenities and common areas and am providing my tenant with an access FOB. The Co-Op will not issue FOBs to private tenants. I understand that I am responsible for the acts of my tenants while on the Co-Op common areas.
2. All tenants are required to submit an application form (which will include credit and background checks)
3. Approval is at the sole discretion of Management but shall not be unreasonably withheld. At the time of application, the applicant must also present to Management for copying, documentation of the age of all proposed occupants of the Dwelling and proof of income.
4. Management reserves the right to refuse admittance to any prospective resident based on established criteria, to determine the background, character, age, and financial responsibility of prospective residents, provided however, that the Association does not discriminate on the basis of race, creed, color, religion, national origin, sex, physical disability, handicap, or any other category prohibited by law.
5. Management reserves the right to require an application fee, not to exceed the maximum cost allowed under Florida Statutes, as applicable, to defray any cost connected with the screening process. The failure of any prospective Resident to provide the required information shall be deemed a cause for refusal of tenancy in the Community.
6. All pets must be registered and must comply with the Rules & Regulations.
7. Failure to obtain Co-Op approval of tenant prior to tenant's occupancy will result in a penalty of $250.00 charged to owner's account.

_____

OWNER SIGNATURE

_____

DATE

Tropic Isles CO-OP, INC.

Property Address:	
Office Date Stamp:	
Fee Paid By: *Circle One*	**Check Cash Credit Card**

APPLICATION FOR RESIDENCY

Instructions: Each individual must complete a separate application. Please complete all sections. Attach copies of photo identification and income verification, pet documents (if applicable), and $75 non-refundable application/background check fee.

Residency is restricted to applicants 55+ or those reaching the age of 55 within one year of application; a spouse or other applicant must be at least 40 years of age. Normal processing time is 5 to 7 business days. Applications requiring review by the Board of Directors may take an additional 5 to 7 business days. Applicant will be notified by email when the application process is complete.

Application is for a: ___ Share Purchase ___ Home Purchase ___ Apartment Rental ___ Home Rental ___ RV Rental

Name of Realtor, Seller or New Landlord: _____

APPLICANT INFORMATION:

				/ /
Last Name	*First Name*	*Middle Name*	*SS#*	*DOB (mo/day/yr)*
				$
Current Address	*City*	*State, Zip*	*Landlord/Mortgagee*	*Monthly Payment*
Driver's License #	*State Issued*	*Email Address*		*Telephone #*
				$
Employer	*Address*	*City, State, Zip*	*Telephone*	*Monthly Income*

Retired? ____ Yes ____No

ANTICIPATED RESIDENT STATUS:

____ Full-Time Resident ____ Part-Time Resident

If part-time, please provide your alternate mailing address:

Address	*City*	*State*	*Zip*	*Telephone*

EMERGENCY CONTACT INFORMATION:

Last Name	*First Name*	*Email*	*Telephone*	*Relationship*

Please answer the following

1. Has applicant ever had an eviction filed or left owing money to an owner or landlord? _____Yes _____ No
2. Has applicant applied for residency in the past 2 years? _____Yes _____ No
3. Has applicant had an adjudication withheld or been convicted of a crime? _____Yes _____ No

If the answer to any of the above is "yes", please explain: _____

_____

AUTHORIZATION:

By signing below, I authorize Tropic Isles Co-Op, Inc. to order and review my credit and criminal history and investigate the accuracy of all information contained in this Application. I further authorize all banks, employers, and creditors to provide any and all information which may be requested concerning my credit.

_____
Applicant Signature

Date: _____

The following items must be submitted with completed application:

___ Photo Identification
___ $75 application fee
___ Proof of income (i.e. bank statements, pension statements, social security, tax returns and/or payroll documents)
(proof of income not required for private home rentals)
___ Pet registration form (if applicable)

Tropic Isles CO-OP, INC.

Property Address:

_____

Received: _____

Approved: _____

PET REGISTRATION FORM

ALL PETS MUST BE REGISTERED – Limit of two (s) pets per household (30lb maximum per pet)

I/We, _____,

residing at _____, Palmetto, FL 34221, County of Manatee,

do hereby register the following pet(s) with the office of Tropic Isles Co-Op, Inc.

Pet #1:

Name:_____ Breed: _____ Weight:_____

Pet #2:

Name:_____ Breed: _____ Weight:_____

Please provide current immunization record for your pet(s). Updated immunization records are to be submitted annually.

By signing below, I/We agree to abide by all applicable pet rules of Tropic Isles Co-Op, Inc.

Signature: _____ Date: _____

Signature: _____ Date: _____