LEASE/PURCHASE APPLICATION CHECK LIST

ASSOCIATION: _____

FUTURE ADDRESS: _____

OWNER: _____ **TENANT(S) if applicable:** _____

APPLICANTS EMAIL: _____

LEASE START or CLOSING DATE: _____ **LEASE END DATE:** _____

_____**LEASE APPLICATION** _____**APP FEE ($_____) (CHECK #_____)**

_____**LEASE CONTRACT**

_____**REGISTRATION** _____**LICENSES** _____**PROOF OF INSURANCE**

_____ **VEHICLE REGISTRATION FORM**

For Office Use Only Below

_____**BACKGROUND CHECK .....($_____) (CHECK #_____)**
(INFO SENT: _____) (RESULTS RECEIVED: _____)

_____**INFORMATION SENT TO BOARD OF DIRECTORS DATE: _____**
_____**APPROVED** _____**DENIED DATE: _____**

_____**APPROVAL SENT TO HOMEOWNER/ TENANT**

Isles of Porto Vista Condominium 06 Association Inc

C/o Infinity Property Management Firm, LLC
9200 Bonita Beach Rd. Ste. 206
Bonita Springs, FL 34135

APPLICATION FOR LEASE or PURCHASE
Of the Isles of Porto Vista Condominium 06 Association Inc

Non-Refundable Background Check fee of $100 per adult 18yrs or older, payable to Infinity Property Management Firm, LLC and Non-Refundable $100 application fee payable to Isles of Porto Vista Condominium 06

The undersigned submit(s) this application for approval by the Board of Directors to rent a unit in Isles of Porto Vista 06 and state(s) that the following information is true and correct.

I/WE understand that any intentional misrepresentation is grounds for automatic denial. We understand that an acceptance interview might be required prior to move-in.

Allow at least fourteen (14) business days from the signed date of application, for processing which may include background checks on adults, verification of previous work & rental history, and contacting listed references.

Current owner of the unit: _____
Representative of the owner: _____
Dates of proposed lease: _____to _____
Signature of owner or representative: _____
Name of prospective adult tenant #1:
_____
DOB:_____SSN:_____
Current address: _____since_____
Permanent mailing address: _____
E-mail address: _____
Telephone: _____Cellphone: _____
Occupation:_____
Employer:_____Tel. No: _____
Have you been convicted of a felony? NO_____ YES_____
If so, when? _____
Name of prospective adult tenant #2: _____
DOB:_____SSN:_____
Current address: _____since_____
Permanent mailing address: _____
E-mail address: _____
Telephone: _____Cellphone: _____
Occupation:_____

Employer:_____Tel. No: _____
Have you been convicted of a felony? NO_____ YES_____
If so, when? _____

If there are additional adults planning to reside here, provide the above information on the reverse of page 1.

Names & ages of minor occupants: _____
_____

Have any of the above applicants resided in Isles of Porto Vista 06 as renter/guest?
Y___N___

PARKING: Isles of Porto Vista's governing documents limit two vehicles per unit. Parking is available on a first-come-first-served basis. **Parking on the grass is prohibited**. Vehicles must have current tags. Recreational vehicles, boats, trailers and commercial vehicles are **prohibited**.

Vehicle #1: _____
(Make Model, Color)
Vehicle #2: _____

(Make Model, Color)

REFERENCES: Please list 3 references other than immediate family, including names, addresses, telephone numbers below.
Reference #1_____Phone: _____
Address: _____
Reference #2 _____Phone: _____
Address: _____
Reference #3 _____Phone: _____
Address: _____

EMERGENCY CONTACTS: Please list 2:
1. NAME _____Telephone no._____
2. NAME_____ Telephone no. _____

All residents & owners of Isles of Porto Vista 06 are bound by the association's documents, bylaws, & rules & regulations. Failure to do so constitutes grounds for denial of application and/or grounds for eviction. Deed restrictions include, but are not limited to, exterior maintenance & alteration, animal control, noise control, vehicular parking, use of common ground, installation of satellite dishes, & proper disposal of garbage, recycling and large items.

Initial each of the below:

____We understand Isles of Porto Vista 06 deed restrictions, bylaws, & Rules & Regulations, and intend to abide by them.

____We understand Lee County's laws regarding animal control, communal living, & vehicle registration requirements.

____We understand Florida's requirements regarding employment & subsequent vehicle registration.

____We authorize and have provided copies of our driver’s licenses to the association to run background checks for all who will be listed on this application and occupying the unit.
____We have provided a copy of the lease agreement between the owner and ourselves outlining the details of our agreement.

Primary applicant's signature: _____Date: _____
Please print name of primary applicant: _____

Co-applicant's signature: _____Date: _____
Please print name of co-applicant: _____

To be completed by Management:

The Board of Directors of Isles of Porto Vista Condominium 06 Association Inc approved the above application:

Board Member: _____

Board Member: _____

Board Member: _____

Community Manager: _____

FINAL APPROVAL authorized by

Board member: _____ _____
(Date)

Isles of Porto Vista Condominium 06 Association Inc

c/o Infinity Property Management Firm
9200 Bonita Beach Rd. Ste. 206
Bonita Springs, FL 34135
Phone (239) 672-8800 * Fax (941) 313-7182

Uniform Pet Registration Application

Each unit may house up to two (2) animals, not exceeding forty (40) pounds at maturity and a combined weight fifty (50) pounds combined, which may only be domestic dogs, cats, or birds. Each pet owner shall be responsible for the removal and disposal of the pet's feces or waste. The ability to have and keep a pet is a privilege and the Board is empowered to order and enforce the removal of any pet that becomes an annoyance to the Association. Pets may not be left unattended or leashed on porches, lanais, patios or on any Community grounds or common areas, as well as outside or in garages.

Name: _____

Address:

_____

Pet Type: _____

Breed: _____

Pet Name: _____

Owners Signature in acknowledgment of the aforementioned: _____
Date: _____

Board Approval Date: _____

*please attach a photo of your pet(s).

Background Check: **Each adult on the application must complete this form. There is a non-refundable $100.00 charge per applicant payable to Infinity Property Management Firm, LLC.**

Address of Unit

Applicant's Name

Day Phone _____

Home Phone _____

Cell Phone _____

Current Address: _____

City/State/Zip: _____

Prior Address: _____

City/State/Zip: _____

*Driver's License Numbers and Social Security Numbers are required for a criminal background check. This information will not be given to any other party for any reason at any time. **It is considered privileged and confidential.**

Social Security Number _____

Date of Birth _____

Driver's License Number and State _____

I authorize Infinity Property Management Firm, LLC to obtain my public records and to investigate any personal information on me necessary to arrive at an applicant decision.

Signature

Date _____/_____/_____

Isles of Porto Vista Condominium 06 Association Inc
Vehicle Registration Form

PLEASE PRINT

I. Condo Unit Resident Information: Head of Household Only

First Name: _____ Last: _____

Unit #: _____ Place building address on this line 3947 Del Sol Lane

Daytime Ph#: _____ Evening #: _____ Cell#: _____

Email: _____ 2nd Email: _____

II. Condo Unit Vehicle Registration

Vehicle #1: Name: _____ Decal# _____

Vehicle Make: _____ Tag#: _____

Color: _____ Year: _____

Vehicle #2: Name: _____ Decal# _____

Vehicle Make: _____ Tag#: _____

Color: _____ Year: _____

Please attach to this sheet a copy of the following documents for each vehicle listed:

_____ Copy of Vehicle Registration Attached
(Place Initials on line)

Once this application has been approved, access information will be provided to the new owners.

Infinity Property Management
9200 Bonita Beach Road #206, Bonita Springs, FL 34135
Phone (239) 672-8800 * Fax (239) 301-4647
mgreen@infinitymgmtllc.com
rep@infinitymgmtllc.com