

VILLA GRANDE at BURNT STORE ISLES, INC.

C/O STAR HOSPITALITY MANAGEMENT, INC.

26530 Mallard Way

PUNTA GORDA, FL 33950

Phone: (941) 575-6764 Fax: (941) 575-7968

APPLICATION FOR LEASE

ADDRESS. _____

1. This application, an application for approval, and authorization forms must be completed in detail by each proposed adult occupant, other than husband/wife, parent/dependent child, or cohabitation couples (which is considered one applicant).
2. If any question is not answered or left blank, this application may be returned, not processed, and not approved.
3. Please attach a copy of the lease to this application.
4. Please attach a **non-refundable \$100.00 processing fee** to this application, made payable to **VILLA GRANDE at BURNT STORE ISLES, INC.** for each applicant, other than husband/wife, parent/dependent child, or cohabitation couples (which is considered one applicant). Acceptance of the processing fee does not in any way constitute approval of this transaction.
5. The completed application must be submitted to the Association office at least 20 workdays prior to the desired date of occupancy (lease).
6. Occupancy prior to Board approval is prohibited.
7. Leasing or renting of a unit by an owner (directly or through an agent), for a period of less than thirty (30) days is prohibited.
No more than 4 leases in a 12-month period are permitted.
Subletting of a unit is prohibited.
8. **NO PETS ALLOWED AT ANY TIME UNLESS APPROVED IN WRITING BY OWNER.**
9. Use of this unit is for single family residence only.
10. No commercial vehicles, trucks (other than trucks not bearing commercial designation), boats, trailers, motor homes, mobile homes, campers, recreational vehicles, motorcycles, mopeds, etc. permitted to park on the premises overnight.
11. The owner (landlord) must provide the lessee with a copy of the Association Rules and Regulations.
12. Occupancy regulations: Each of the units shall be occupied by a single family.
13. Please complete and return the background check form for each adult applicant. Please duplicate as necessary.

MUST PRINT OR TYPE ALL INFORMATION ON THESE FORMS

Date _____ Lease Term: from _____ to _____

Owner's Name _____

Owner's Present Address: _____ Tele. No. _____

Name of Realtor handling lease: _____ Tele. No. _____

NAME of proposed Lessee (as Lease will appear): _____

a. _____ b. _____ (Spouse)

Proposed Lessee Tele. No. _____ & E-mail _____

OTHER PERSONS who will occupy the premises with you:

<u>Name</u>	<u>Age</u>	<u>Relationship/Occupation</u>
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Have you ever been convicted or pled to a crime? _____ If yes, please state the date(s), charge(s) and disposition(s): _____

1. I hereby agree for myself and on behalf of all persons who may use the unit which I seek to Lease:
- a) I will abide by all the restrictions contained in the Bylaws, Rules & Regulations, and restrictions which are or may in the future be imposed by VILLA GRANDE at BURNT STORE ISLES INC.
 - b) I understand that there is a restriction on pets and that I may not bring a unless approved in writing by the owner.
 - c) I understand that I must be present when any guests, relatives, visitors, or children who are not permanent residents occupy the unit or use the recreational facilities.
 - d) I understand that sub-leasing or occupancy of this unit in my absence is prohibited.
 - e) I understand that any violation of the terms, provisions, conditions, and covenants of VILLA GRANDE at BURNT STORE ISLES, INC. documents provides cause for immediate action as therein provided or termination of the leasehold under appropriate circumstances.

2. I have received a copy of the Rule & Regulations and Renters Information Sheet: Yes _____ No _____

Note: When Provisions of the Association on Governing Documents are silent or in conflict or contradict Florida Statutes, Florida Statutes will prevail.

3. I understand that I will be advised by the Board of Directors of either acceptance or denial of this application. Occupancy prior to Board approval is prohibited.
4. I understand that the acceptance for Lease at VILLA GRANDE at BURNT STORE ISLES is conditioned in part upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of information on these forms will result in the automatic disqualification of my application. Occupancy prior to Board approval is prohibited.
5. I understand that the Board of Directors of VILLA GRANDE at BURNT STORE ISLES, INC. may cause to be instituted an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors, Management and NATIONAL RESEARCH GROUP to make such investigation and agree that the information contained in this and the attached application may be used in such investigation, and that the Board of Directors, Officers and Management of VILLA GRANDI at BURNT STORE ISLES, INC. itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors.

In making the foregoing application, I am aware that the decision of the VILLA GRANDE at BURNT STORE ISLES, INC. will be final, and no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board of Directors.

APPLICANT _____

APPLICANT _____



Applicant - 2004

NATIONAL RESEARCH GROUP

APPLICANT BACKGROUND CHECKS



APPLICANT'S or EMPLOYEE'S AUTHORIZATION for The National Research Group Inc.
to Conduct Individual Background Searches and Verifications as Requested By The Employer

BACKGROUND INQUIRY RELEASE

I understand that an investigative background inquiry is to be made on myself, including but not limited to identity and prior address(es) verification, criminal history, driving history, credit history, education verification, licensing verification, prior employment verification, reason(s) for termination of prior employment, work and other references, as well as other information.

I understand that the information and reports developed may include information as to my character, work habits, job performance and experience, along with reasons for termination of past employment. I further understand that for purposes of this background inquiry, various sources will be contacted to provide information, including but not limited to various federal, state, municipal, corporate, private and other sources which may maintain records concerning my past activities relating to possible criminal conduct, civil court litigation, driving history and credit performance, as well as other information.

I authorize, without reservation, any company, agency, party, or other source contacted to furnish the above information. I also hereby consent to the retrieval of the above information and I further understand that to aid in the proper identification of my files or records, I am willingly providing the following information, as well as any other information that may be required and/or requested at a later date.

PLEASE PRINT CLEARLY

> Include Maiden Name and/or Other Names Known By

FULL LEGAL NAME: _____

SOCIAL SECURITY #: _____ DATE OF BIRTH: _____

DRIVER'S LICENSE #: _____ STATE OF ISSUE: _____

CURRENT ADDRESS: _____ Dates: _____

CITY-STATE-ZIP: _____

PRIOR ADDRESS: _____ Dates: _____

CITY-STATE-ZIP: _____

Please Provide ADDITIONAL PRIOR RESIDENCE ADDRESSES For The LAST 7 YEARS Include Dates of Residence Above and Below

Address: _____ Dates: _____

Address: _____ Dates: _____

Address: _____ Dates: _____

Address: _____ Dates: _____

Please **SIGN**
With Full Legal Name and Date:

APPLICANT'S SIGNATURE: _____ Date: _____

941-488-8500

800-531-6522

941-488-8505