

APPLICATION TO RENEW LEASE

PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

c/o Gulf Breeze Management Services of S W Florida, Inc.

8910 Terrene Court - Suite 200

Bonita Springs, FL 34135-9514

Tel: (239) 498-3311 FAX: (239) 498-4974

DO THE APPLICANT(S) BELOW SPEAK, WRITE AND UNDERSTAND ENGLISH?

YES ☐ NO ☐

[Fill in the appropriate circle]

If NO--- please provide in detail the method used to interpret and fully comprehend the contents of this form, the condominium documents, and rules and regulations noted in the acknowledgements of this form.

SPECIAL PROVISION

I initially accessed the Abridged Version of the Rules and Regulations and Related Information of this Association.

The latest updated version being available at:

www.piperspointecondo.com in the documents section.

I have re-read and understand the latest abridged version prior to executing this agreement. I understand that I will continue to share the contents this updated abridged edition with my family and guests when hosting them for any stay.

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I acknowledge this provision of the application by signing here:

Mandatory SIGNATURE OF LESSEE

PRINTED NAME

Mandatory SIGNATURE OF CO-LESSEE

PRINTED NAME

IMPORTANT NOTICE

Leases in Piper's Pointe Condominium Association, Inc. have a maximum term of one (1) year. You are hereby reminded that your tenancy or lease must be renewed annually before the anniversary date of the existing lease. The renewal application form must be approved by the Board of Directors. A \$10.00 Renewal Fee is payable annually with the renewal application to Piper's Pointe Condo. Assoc., Inc. Your unit owner/landlord is responsible for this process, and you should contact them at least 30 days prior to your lease expiration date to renew.

The necessary and proper submission of this Lease Renewal Application is the sole responsibility of the unit owner. The owner(s) is/are responsible to ensure that the applicant and/or leasing agent completes the entire application. The current version of the application form must be utilized. Each page of the application shall be initialed by the applicant, and all information shall be clearly legible without exception. All items must be answered, and if not relevant, "N/A" shall be indicated.

A copy of the Owner's Lease Agreement, the HOA-4 Insurance Binder, copies of the DMV Registration Certificate(s) for any vehicles to be permitted, along with

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the Renewal Service Fee of \$10.00 (Money Order or Check) for processing, must accompany this application.

This application, accompanied by all requested documents, shall be submitted to Gulf Breeze Management Services of S W Florida, Inc. at least thirty (30) days prior to the expected renewal. commencement. If any information is missing and/or requires clarification, the applicant has three (3) days to comply with the request for additional information.

The applicant and owner are responsible for updating all information with Gulf Breeze Management Services of S W Florida, Inc. during the term of the lease.

[Any and all changes to the lease require the owner's and Board of Directors approval].

****SECURITY DEPOSIT REFUNDS are processed after vacating and inspection of the unit upon the request of the applicant by notifying via e-mail Gulf Breeze Management Services of SW Florida, Inc. to tracy.minniti@gulfbreezemanagement.com*

I hereby apply for approval to RENEW MY LEASE in Unit # _____, located at # _____ Wading Bird Circle or Grand Oaks Way in Piper's Pointe, a condominium, for the period beginning:

_____ and ending _____.

Full Name of Lessee: _____

E-Mail Address: _____

Home Phone # _____ Work # _____

Cell # _____ Other _____

Date of Birth (MM/DD/YYYY) _____

Occupation/Business/Profession: _____

Employer: _____ Tel. # _____

Address: _____

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If Retired: Former Occupation Business/Profession: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

Full Name of Co-Lessee (If applicable): _____

E-Mail Address: _____

Home Phone # _____ Work # _____

Cell # _____ Other _____

Date of Birth (MM/DD/YYYY) _____ Social Security Number: _____

Occupation/Business/Profession: _____

Employer: _____ Tel. # _____

Address: _____

If Retired: Former Occupation Business/Profession: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

ADDITIONAL RESIDENTS:

Please state name, relationship and date of birth of all persons to be in residence (Social Security Number for Occupants 18 years and older required)

Occupant #2	Relationship	Age
SS # _____ D.O.B.: _____ / _____ / _____		

Occupant #3	Relationship	Age
SS # _____ D.O.B.: _____ / _____ / _____		

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Occupant #4 Relationship Age
SS # _____ D.O.B.: _____ / _____ / _____

***Below Applicable for Three (3) Bedroom Units only**

* _____
Occupant #5 Relationship Age
SS # _____ D.O.B.: _____ / _____ / _____

* _____
Occupant #6 Relationship Age
SS # _____ D.O.B.: _____ / _____ / _____

*Are **all** proposed Lessees U.S. citizens? Yes _____ No _____

If no, what is the immigration status?

*Has the Lessee or Co-Lessee ever filed bankruptcy? Yes: ____ No : ____ Year?

*Has anyone to be in residence been convicted of a felony? Yes: ____ No: ____ YEAR

Reason: _____

Has anyone to be in residence been convicted for being under the influence **or** dealing in drugs, including alcohol? Yes: ____ No ____ YEAR _____

Has anyone to be in residence been convicted of a sexual related offense? Yes: ____ No ____

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PERSONAL VEHICLES:

Make of cars to be parked at the condominium (maximum two vehicles permitted to each unit). All vehicles require a Piper's Pointe Condo. Assoc. issued parking permit which is always to be properly displayed while on the property. Refer to Rules and Regulations for Guest parking protocols. **PERMITS REMAIN PROPERTY OF THE ASSOCIATION.**

#1 Make _____ State/Prov: _____ Color: _____

Plate/Tag _____ REGISTERED OWNER: _____

Is this vehicle manufactured, placarded or used for commercial business? _____

#2 Make _____ State/Prov: _____ Color: _____

Plate/Tag _____ REGISTERED OWNER: _____

Is this vehicle manufactured, placarded or used for commercial business? _____

All vehicles shall be owned/authorized to the registered occupants.

IN AN EMERGENCY

Person to be Notified in Case of Emergency:

Name: _____ Relation: _____

Home Phone: _____ Other: _____ Cell Phone: _____

Address: _____

City: _____ State/Prov: _____ Postal/Zip Code: _____

Mailing Address for Notices Associated with This Application.

Name: _____

Address: _____

E-mail: _____

PIPER'S POINTE CONDOMINIUM ASSOCIATION, INC.

ACKNOWLEDGEMENTS

Piper's Pointe Condominium Declaration specifies that "each condominium unit shall be occupied by a **single family**, as a residence, and for NO OTHER PURPOSE WHATSOEVER," and "in no event shall occupancy exceed two (2) persons per bedroom and/or den."

Subsequent changes to this occupancy information must be reported to the Association.

Acknowledged by initialing here: _____

I comprehend that the Association mandates the maintenance of a Florida HO-4 Insurance Policy prior to occupancy and during occupancy, respectively.

Acknowledged by initialing here: _____

I understand and agree that the Association **prohibits boats, motorcycles, scooters, trucks (including pick-up trucks, vans not designed for passengers, vans with racks, tool bodies, welder's compressors or other equipment in or attached to the bed or roof), and any commercial vehicles, vehicles used for commercial purposes, trailers, recreational vehicles, vehicles with a wheel size more than 33 inches high or other motor vehicle, except four (4) wheel passenger automobiles, vans or trucks built by the manufacturer as passenger trucks as determined by the Board of Directors shall be placed,**

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parked or stored on the Association property for a period more than four (4) hours in the aggregate, in anyone 24 hour period unless such vehicle is necessary in the actual construction and/or repair of a structure or for ground maintenance nor shall any maintenance or repair be performed on any boat or motor vehicle not owned or controlled by the Association. Normal working hours are 7:00 AM to 7:00 PM. Outside this time frame allowed only for an Emergency. No vehicle of any kind in serious need of repair, visual or otherwise, may be placed, parked, or stored in Association property for a period of more than four (4) hours. Vehicles leaking any fluids, such as grease and oil, shall not be placed, parked, or stored on Association property at any time. Vehicle owner will bear the cost of mitigating spillage.

For clarification, the four-hour rule permits visitors to park for up to four hours and prohibits residents from parking prohibited vehicles.

Acknowledged by initialing here: _____

Do you currently have any pets that you intend to harbor in Piper's Pointe? _____ *[Strictly enforced]*

I acknowledge and agree that lessee(s) and occupants are prohibited from harboring any pets of any kind. I will adhere to these provisions throughout the term(s) of my lease. I understand that I will be subject

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to legal action for any violation of the laws of the State of Florida or the Americans with Disabilities Act (ADA) and the Fair Housing Act (FHA), as they pertain to "Emotional Support or equal" animals. Furthermore, if the Association is required to approve tenancy that includes an animal, except for Bonafide Service Animals, you must provide an insurance binder in the amount of Twenty Thousand Dollars (\$20,000.00) with the Association listed as the beneficiary for all such animals. Additionally, you must provide a copy of the County license for the animal.

Acknowledged by signing here:

Signature _____
Required

I will comply with the provision in the rules set forth by the Board of Directors to maintain the entry and door to my unit so that it is clean and free of any debris including sweeping and removing environmental foreign objects. **Acknowledged by initialing here:** _____

I understand and agree that the Association, in the event it approves this LEASE RENEWAL, is authorized to act as the owner's agent, with full power and authority to take whatever action it deems necessary, including eviction, to prevent violations by lessee(s) and their guests, of provisions of the Documents and the Rules and Regulations of the Association; the laws of the State of Florida and Collier County.

Acknowledged by initialing here: _____

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I agree that I/we will not SUBLEASE, HARBOR or LOAN USE to anyone not stipulated and approved by the Owner and Board of Directors in writing. A violation of this section will result in termination proceedings of the lease, forthwith.

SIGNATURE OF LESSEE

In accordance with the regulations established by the Board of Directors, I shall ensure the cleanliness and tidiness of my unit's entry and doorways. This entails sweeping and removing any environmental debris or foreign objects that may accumulate.

Acknowledged by initialing here: _____

I comprehend and concur that the Association, upon approving this LEASE, is empowered to act as the owner's agent, with complete authority to take any action it deems necessary, including eviction, to prevent violations by lessee(s) and their guests of the provisions of the Documents and the Rules and Regulations of the Association; the laws of the State of Florida and Collier County.

Acknowledged by initialing here: _____

I further agree to comply with the directives set forth by the Board of Directors of the Association or their agent, as may be promulgated from time to time.

Acknowledged by initialing here: _____ .

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To facilitate the consideration of this application, I, the undersigned, hereby affirm that all information provided for this application is accurate and truthful. I acknowledge that any falsification or misrepresentation will warrant its disapproval. Furthermore, I agree to adhere to all Piper's Pointe Condominium Association, Inc. rules and regulations and understand that any violation of these rules and regulations may result in eviction.

Section 13.6 of the Amended and Restated Declaration of Condominium, which tenants are subject to, mandates that tenants adhere to the terms of the Declaration, the rules and regulations of the Association, and any other provisions contained within those documents. Should a tenant fail to comply with these provisions, they hereby acknowledge that the Association possesses the authority to terminate their lease on behalf of their landlord and cause their removal from the property, irrespective of any provisions outlined in their lease. In the event of such a breach, the tenant acknowledges and agrees that their lease may be terminated by the Association, and they may be compelled to vacate the unit. Any legal action brought by the Association will be subject to a summary procedure, during which the court will prioritize the case on its calendar.

This document is executed as a sealed instrument, signed this _____ day of _____ in the year _____.

Applicant:

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Witness:

Co-Applicant:

Witness:

MANDATORY: By signing below the owner and/or the realtor, the individual acknowledges and confirms that the rules and regulations of the Association are made available to the applicant. [The Rules & Regulations, along with other necessary information are available on *PipersPointeCondo.com*.]

The applicant was provided with two (2) mailbox keys and at least one (1) amenity (pool) key and maintains the keys at this time. It is the sole responsibility of the owner/realty agent to ensure this provision. Subsequently, tenants shall be responsible for the keys and the cost of replacements if necessary and that the key secured by the PPCA Corporation for access to this unit is in full compliance with Florida Statute § 718.111(5)(a).

By signature below, I certify that ALL provisions of the previous two (2) paragraphs have been met.

Mandatory OWNER OR AGENT SIGNATURE

PRINTED NAME OF OWNER or AGENT EXECUTING THIS LEASE

DBA

ADDRESS:

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CITY:

STATE

TELEPHONE:

E-MAIL:

Tenant's concurrence:

Signature:

An application submitted without a signature will be deemed incomplete and not received or dated received.

APPLICATION PROTOCOL

A prospective lessee will be advised by the Association office within a fifteen (15) day period from the date of receiving the application, of whether this application has been approved. An APPROVAL is VOID in the event of false statements in this application.

A Renewal Fee in the form of a check for Ten (\$10.00 USD) payable to Gulf Breeze Management Services of SW Florida, Inc, must accompany this application for the purpose of defraying associated cost expenses related to the processing of this application. A valid Social Security number may be required for this purpose and will be safeguarded in accordance with all provisions of governmental regulations.

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Notes:

- ___ All entries addressed
- ___ Legible Completed Application
- ___ Copy of the Owner/Tenant renewal agreement
- ___ Proof of Maintained HOA-4 Insurance Policy confirmation
- ___ Proof of \$20,000.00 animal insurance binder (if applicable)
- ___ \$10.00 payment to Gulf Breeze Management
- ___ \$1,200.00 Security Deposit by and for applicant (Long Term Lease) on file OR
- ___ \$700.00 Security Deposit for 3 to 6 month Seasonal Lease
- ___ Number of Violations on file for current occupancy

Date Received: _____ by Gulf Breeze Management Services of S W Florida, Inc.

Forwarded to the BOD on: _____

to: _____

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ACTION - THE BOARD OF DIRECTORS

Approved _____ Disapproved _____ Date: _____

Board Member: _____

Title: _____