

VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION

BLDG. _____

UNIT _____

RETURN TO:

Bruce Peters

peters7038@msn.com

12651 S W Kingsway Cir,

Lake Suzy, FL 34269

APPLICATION FOR LEASE

- This application must be complete in detail by each proposed adult occupant, other than husband/wife or parent/dependent child (which is considered one applicant.)
- If any question is not answered or left blank, this application may be returned, not processed and not approved.
- Please attach a copy of the lease to this application
- The completed application must be submitted to the "Return To" address listed above, at least 15 days prior to the desired date of occupancy (lease date).
- No lease shall be for less than six (6) months.
- No pets allowed at any time.
- Use of this unit is for single-family residence only.
- The owner (landlord must provide the lessee with a copy of the **ASSOCIATION RULES AND REGULATIONS**.
- Hours for moving are from 8:00 a.m. to sundown, Monday through Saturday.

VILLAS OF KINGS CROSSING CONDOMINIUM ASSOC., INC.
UNIT OWNER & LESSEE INFORMATION

UNIT NUMBER _____

OWNER/CURRENT RESIDENT INFORMATION

NAME _____

ADDRESS _____

TELEPHONE _____

EMAIL ADDRESS _____

CELLULAR TELEPHONE _____

LESSEE INFORMATION

NAME _____

VILLA ADDRESS _____

TELEPHONE _____

EMAIL ADDRESS _____

CELLULAR TELEPHONE _____

NAMES OF OTHER RESIDENTS AT LEASED VILLA

DATES OF LEASE AGREEMENT

START DATE _____

END DATE _____

OWNER'S SIGNATURE _____

DATE _____

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 of the restrictions contained in the Bylaw, Rules & Regulations, and restriction which are or may in the future be imposed by **VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION**.
 - b. I understand that there is a restriction on pets and that I may not bring a pet, nor may any guest or visitor bring a pet in **VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION**, nor acquire one, either temporarily or permanently after occupancy.
 - 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 the **VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION** 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 Rules & Regulations: Yes _____ No _____
3. I understand that I will be advised by the Board of Directors of either acceptance or denial of the application. Occupancy prior to Board approval is prohibited.
4. I understand that the acceptance for Lease at **VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION** is conditioned 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.
5. I understand the Board of Directors of the **VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION** 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 RENTERS REFERENCE OF FLORIDA, INC. 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 the **VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION** 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 **VILLAS OF KINGS CROSSING CONDOMINIUM ASSOCIATION** will be final and the Board of Directors will give no reason for any action taken. I agree to be governed by the determination of the Board of Directors.

Applicant _____ Applicant _____ DATE _____