

OSPREY RUN HOMEOWNERS ASSOCIATION, INC.

LEASE APPLICATION

Revised 4/15/2010

IMPORTANT: Please answer all questions and include a copy of the lease agreement in order to expedite approval. Consult rules vehicle/parking-specifically forbidden are boats, trailer, and oversized vehicles such as RV's. Applications must be submitted a minimum of 2 weeks prior to proposed move-in date.

Property Address: _____

Name of Present Owner: _____

Mailing Address of Present Owner: _____

PERSONAL DATA OF LESSEE(S):

1. **NAME:** _____ **HOME PHONE** _____
SS#: _____ **DOB:** _____

2. **NAME:** _____ **HOME PHONE** _____
SS#: _____ **DOB:** _____

1. **DRIVER'S LICENSE NO.** _____ **VEHICLE # 1** _____
STATE _____ **LICENSE PLATE NUMBER** _____

2. **DRIVER'S LICENSE NO.** _____ **VEHICLE # 2** _____
STATE _____ **LICENSE PLATE NUMBER** _____

CHILDREN: (NAMES) _____

PET(S); # _____ **BREED(S)** _____ **WEIGHT** _____ **LBS.**

PRESENT LANDLORD ADDRESS : _____ **PHONE:** _____

CURRENT ADDRESS: _____ **HOW LONG** _____

PREVIOUS LANDLORD: _____ **PHONE:** _____

NEAREST RELATIVE'S NAME: _____ **PHONE:** _____

1. **EMPLOYER:** _____ **HOW LONG** _____

PHONE: _____ **OCCUPATION:** _____

2. **EMPLOYER:** _____ **HOW LONG** _____

PHONE: _____ **OCCUPATION:** _____

OTHER PERSON(S) WHO WILL BE PRESENT IN UNIT FOR MORE THAN ONE(1) WEEK

DURING A ONE (1) YEAR PERIOD. _____

BANK NAME: _____ SOCIAL SECURITY NUMBER: _____

HAVE YOU EVER BEEN EVICTED: YES _____ NO _____

HAVE YOU EVER BEEN IN LITIGATION WITH A LANDLORD OR CONDOMINIUM ASSOCIATION: YES _____ NO _____. IF YES, TO THIS OR PREVIOUS QUESTION, PLEASE GIVE DETAILS AS TO NAME; DATE; LOCATION AND ANY OTHER DETAILS THAT ARE PERTINENT; USE SEPARATE SHEET OF PAPER IF NEEDED.

IMPORTANT: PLEASE FILL OUT AND SIGN and submit for approval. A certificate for approval will be mailed to the unit owner or agent, (specify as to which). ONLY THEN MAY A MOVE-IN ON PROPERTY BE ALLOWED.

LEASE DATA:

NAME OF REAL ESTATE AGENCY: _____

ADDRESS: _____

PHONE: _____

IF A REAL ESTATE AGENCY IS NOT INVOLVED, LIST THE NAME ADDRESS AND PHONE NUMBER OF PERSON HANDLING THE LEASE (ATTORNEY, TITLE CO., ETC.).

NO LEASE SHALL BE FOR A PERIOD OF LESS THAN ONE (1) YEAR.

Applicant hereby authorizes Accurate Tenant Screening and/or agents to obtain civil, criminal, and/or credit checks, as well as confirmations from present or past employers or landlords and references on application form. Association reserves the right to deny this application if purulent information is incorrect or omitted.

I/We _____ hereby allow TENANT CHECK and or the property owner/manager to inquire into my/our credit file, criminal, and rental history to obtain information. I/We understand that on my/our credit file it may appear that TENANT CHECK has made an inquiry. I/We cannot claim any invasion of privacy against them now, or in the future.

LESSEE SIGNATURE

Lessee(s) affirms that she/he/they has/have read, understands and agrees to abide by all the conditions and terms stated in the aforespecified documents and that she/he/they agree(s) to abide by all Rules and Regulations duly enacted hereinafter by the Association.

Maintenance fees are due at the first of each month and are subject to a late fee if not received by the 10th of the month.

PROPOSED MOVE IN DATE: _____ LEASE EXPIRES: _____

I/We will be bound by the Declaration, Bylaws, Articles of Incorporation and the Rules and Regulations of the Homeowner Association.

The Association and its agent, in the event it consents to a lease, is hereby authorized to act as our agent with full power and authority to take such action as may be required, if necessary, to compel compliance by our lessee(s) and/or their guests, with provisions of the declaration, its supportive exhibits, and rules and regulations of the association, or in the instance of violation of any of the above by the lessee(s) and/or their guests, under appropriate circumstances, to terminate the leasehold. If this application is for a lease, the lessor agrees to reimburse the association for any attorney's fees and costs incurred as lessor's agent in such enforcement or lease termination.

In order to facilitate consideration of my/our application for lease of the above-designated unit, I/we have cause the proposed lessee to complete the attached application by Proposed lessee. I/We am/are aware that any falsification or misrepresentation of the facts in the attached application will result in the automatic rejection of this application to lease. Also attached is a check for the Association's application fee.

APPLICANTS(S) SIGNATURE(S):	DATE:	WITNESS:
_____	_____	_____
_____	_____	_____

NOTE: EACH APPLICANT MUST INDIVIDUALLY SIGN THIS FORM BEFORE APPROVAL CAN BE ISSUED. IN ORDER FOR AN APPLICATION TO BE CONSIDERED, A COMPLETED APPLICATION MUST BE ACCOMPANIED BY A CHECK IN THE AMOUNT OF THE APPROPRIATE APPLICATION FEE AND A COPY OF THE LEASE CONTRACT.

Applicants are interviewed by appointment **ONLY**, no exceptions!

Please mail or hand deliver the application package to:
SENTRY MANAGEMENT
25400 US 19 N. SUITE 164
CLEARWATER, FL 33763

Should you have any questions, please contact Sentry Management at (727)-799-8982 or fax 799-8984

OFFICE USE ONLY

Board of Directors approval:

Monthly Maint: _____

Paid Through: _____

Account is current _____ Yes _____ No

Balance Due: _____