

**Cinnamon Cove Terrace VII Condominium Association, Inc.**

Sandcastle Property Management  
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Fort Myers, Florida 33908  
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**NOTICE OF LEASE APPLICATION**

**This form must be submitted to Cinnamon Cove Terrace VII Condominium Association Board of Directors at least (15) days prior to the start of any lease. PETS are not permitted in leased units.**

- NO LEASE MAY BE FOR A PERIOD OF LESS THAN THIRTY (30) CONSECUTIVE DAYS UP TO A MAXIMUM OF 4 TIMES PER YEAR;
- USE OF UNIT IS LIMITED TO SINGLE FAMILY RESIDENCY;
- OCCUPANCY OF THE UNIT IS LIMITED TO LESSEE AND HIS/HER IMMEDIATE FAMILY LISTED BELOW;
- **RENTERS MAY NOT HAVE PETS.**

For a lease, in compliance with the Declaration of Covenants and Restrictions of the Association named above, I (we) serve notice as Owners(s) or Agent of the referenced unit below. I (we) intend to offer said for lease in accordance with the attached lease agreement.

I (we) understand and hereby agree that I (we) are fully responsible for ensuring the lessee and their guests abide by the Association's Declaration of Covenants and Restrictions and Rules and Regulations. I (we) further agree to provide Lessee with copies of the same.

**LEASED UNIT ADDRESS** \_\_\_\_\_ **UNIT#:** \_\_\_\_\_

**LEASE PERIOD FROM** \_\_\_\_\_ **TO** \_\_\_\_\_

**UNIT OWNER INFORMATION (LESSOR)**

**NAME:** \_\_\_\_\_

**PERMANENT ADDRESS:** \_\_\_\_\_

**PHONE:** ( ) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**LESSEE INFORMATION #1**

**NAME:** \_\_\_\_\_

**CURRENT ADDRESS:** \_\_\_\_\_

**PHONE:** ( ) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_

**PHONE:** ( ) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**VEHICLE 1: Yr/Make/Model:** \_\_\_\_\_ **License #:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**LESSEE INFORMATION #2**

**NAME:** \_\_\_\_\_

**CURRENT ADDRESS:** \_\_\_\_\_

**PHONE:** ( ) \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

VEHICLE 2: Yr/Make/Model: \_\_\_\_\_ License #: \_\_\_\_\_ STATE: \_\_\_\_\_

Will anyone other than those listed above occupy this unit? \_\_\_ No \_\_\_ Yes

Number of permanent occupants: \_\_\_\_\_

<u>Name</u>	<u>Relationship</u>
_____	_____
_____	_____
_____	_____

**EMERGENCY CONTACT:**

NAME: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

TWO (2) PERSONAL REFERENCES: (local if possible)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

I have received and read a copy of the Terrace VII Condominium Association, Inc. Declarations of Covenants, Rules and Regulations and Use Restrictions. I understand these Declarations of Covenants, Rules and Regulations and Use Restrictions and agree to abide by them as long as I reside at Cinnamon Cove Terrace VII Condominium Association. I do understand that failure to do so provides cause for immediate action as therein provided, or termination under appropriate circumstances.

\_\_\_\_\_  
Applicant's Signature #1

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature #2

\_\_\_\_\_  
Date

\_\_\_\_\_  
Unit Owner's Signature

\_\_\_\_\_  
Date

**LEASING AGENT INFORMATION:**

FIRM HANDLING LEASE: \_\_\_\_\_

PHONE ( ) \_\_\_\_\_ - \_\_\_\_\_

AGENT NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_ - \_\_\_\_\_      EMAIL: \_\_\_\_\_

**THE FOLLOWING ITEMS MUST BE SUBMITTED TO SANDCASTLE PROPERTY MANAGEMENT FOR PROCESSING:**

1. Completed Cinnamon Cove Terrace VII Lease Application.
2. Copy of the signed Lease/Rental agreement.
3. Copy of signed Rules and Regulations
4. Copy of Drivers License
5. Non-Refundable processing fee of \$100 made payable to Sandcastle Property Management
6. Background check fee of \$75 per adult made payable to Sandcastle Property Management