

Forest Mere Townhouse Association, Inc Association, Inc.
C/O SAK & Associates, Mgmt, Inc.
8695 College Pkwy, Ste. 2031
Fort Myers, FL 33919

APPLICATION FOR RENTAL/LEASE of the Forest Mere unit located at _____.

The undersigned submit(s) this application for approval by the Board of Directors to rent a unit in Forest Mere and state(s) that the following information is true and correct.

I/WE understand that any intentional misrepresentation is grounds for automatic denial.
We understand that an acceptance interview might be required prior to move-in.

Allow at least TEN BUSINESS DAYS from the date of application for processing, which may include background checks on adults, verification of previous work & rental history, and contacting listed references.

Current owner of the unit: _____
Representative of the owner: _____
Dates of proposed lease: _____ to _____
Signature of owner or representative: _____

Name of prospective adult tenant #1: _____
DOB: _____ SSN: _____
Current address: _____ since _____
Permanent mailing address: _____
E-mail address: _____
Telephone: _____ Cellphone: _____
Occupation: _____
Employer: _____ Tel. No: _____
Have you been convicted of a felony? NO _____ YES _____ If so, when? _____

Name of prospective adult tenant #2: _____
DOB: _____ SSN: _____
Current address: _____ since _____
Permanent mailing address: _____
E-mail address: _____
Telephone: _____ Cellphone: _____
Occupation: _____
Employer: _____ Tel. No: _____
Have you been convicted of a felony? NO _____ YES _____ If so, when? _____

If there are additional adults planning to reside here, provide the above information on the reverse of page 1.

Names & ages of minor occupants: _____

Have any of the above applicants resided in Forest Mere as renter/guest? Y___N___

PETS. County ordinances require that all pets be on leash when outside & mandate that their waste be picked up & properly disposed of by the pet owner.

Pet # 1:

Name: _____ Breed/color _____ Age _____

Current weight: _____ lbs. Adult weight will be _____ lbs.

Pet # 2:

Name: _____ Breed/color _____ Age _____

Current weight: _____ lbs. Adult weight will be _____ lbs.

PARKING: Forest Mere 's governing documents limit vehicular parking to assigned unit designated overflow parking spaces. Roadway Parking is available on a first-come-first-served basis. Parking on the on the grass is prohibited. Vehicles must have current tags. Recreational vehicles, boats, trailers and commercial vehicles are prohibited. Use of another unit's space requires prior permission from the owner.

Vehicle #1: _____

(Make, Model, Color, Tag #)

Vehicle #2: _____

(Make, Model, Color, Tag #)

REFERENCES: Please list 3 references other than immediate family, including names, addresses, telephone numbers below.

Reference #1 _____

Reference #2 _____

Reference #3 _____

EMERGENCY CONTACTS: Please list 2:

1. NAME _____ Telephone no. _____

2. NAME _____ Telephone no. _____

All residents & owners of Forest Mere are bound by the association's documents, bylaws, & rules & regulations. Failure to do so constitutes grounds for denial of application and/or grounds for eviction. Deed restrictions include, but are not limited to, exterior maintenance & alteration, animal control, noise control, vehicular parking, use of common ground, installation of satellite dishes, & proper disposal of garbage, recycling and large items.

Initial each of the below:

____ We understand Forest Mere 's deed restrictions, bylaws, & Rules & Regulations, and intend to abide by them.

____ We understand Lee County's laws regarding animal control, communal living, & vehicle registration requirements.

____ We understand Florida's requirements regarding employment & subsequent vehicle registration.

Primary applicant's signature: _____ Date: _____

Please print name of primary applicant: _____

Co-applicant's signature: _____ Date: _____

Please print name of co-applicant: _____

To be completed by Management:

These 3 members of the Board of Directors of Forest Mere approved the above application: _____, _____,

and _____.

Manager _____, Date: _____

FINAL APPROVAL authorized by Board member _____

on _____.

(date)