

COLONY AT WIGGINS BAY

Lease Application

C/O Paramount Property Management
5629 Strand Blvd., Suite 412
Naples, FL 34110

**APPLICATIONS ARE NOT COMPLETE WITHOUT THE FOLLOWING AND WILL BE
SENT BACK TO THE APPLICANT**

PLEASE SEND ONE-SIDED DOCUMENTS ONLY.

PLEASE INCLUDE THE FOLLOWING WITH YOUR APPLICATION:

_____ COPY OF THE LEASE CONTRACT/AGREEMENT.

_____ COMPLETED AND SIGNED APPLICATION.

_____ A non-refundable \$150.00 check made payable to: **PARAMONT PROPERTY MGMT.**

_____ Unit Owner(s) Signature	_____ E-mail	_____ Date
_____ Applicant Signature	_____ E-mail	_____ Date
_____ Applicant Signature	_____ E-mail	_____ Date
_____ Rental Agent Signature	_____ E-mail	_____ Date

LEASE APPLICATION FOR APPROVAL: COLONY AT WIGGINS BAY

TO: The Board of Directors of COLONY AT WIGGINS BAY

I (We) hereby apply for approval to lease:

condominium, for the period beginning _____, 20____, and ending _____, 20____.

A complete copy of the signed lease is attached.

In order to facilitate consideration of this application, I (we) represent that the following information is factual and correct and I (we) agree that any falsification, misrepresentation, or incomplete information in this application will justify its disapproval. I (We) consent to your further inquiry concerning this application, particularly of the references given below and a criminal and financial investigation into my background.

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:

1. Full name of applicant: _____
Date of Birth: _____ E-mail: _____

2. Full name of spouse (if any): _____
Date of Birth: _____ E-mail: _____

3. Home address:
Address: _____
City/State: _____ Zip: _____ Phone: () _____

4. Telephone:
Home: () _____ Preferred _____
Business: () _____ _____
Cell: () _____ _____

5. Nature of business or profession: _____
If retired, former business of profession: _____

6. Company or firm name: _____

7. Business address: _____

Occupants:

Name	Relationship
_____	_____
_____	_____
_____	_____

10. Name of current or most recent landlord: _____
Address: _____
City/State: _____ Zip: _____ Phone: () _____

11. Two personal references (local, if possible):
Name: _____
Address: _____
City/State: _____ Zip: _____ Phone: () _____

Name: _____
Address: _____
City/State: _____ Zip: _____ Phone: () _____

12. Person to be notified in case of emergency:
Name: _____
Address: _____
City/State: _____ Zip: _____ Phone: () _____

13. Motor vehicle(s) to be kept at the condominium:

Make	Model	Year	License #	State
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

****All commercial vehicles displaying business logos must be parked in the garage and cannot be parked in the driveway****

14. Mailing address for notices connected with this application:
Name: _____
Address: _____
City/State: _____ Zip: _____ Phone: () _____

Applicant Signature _____ Date _____
Applicant Signature _____ Date _____

All leases must and shall be deemed to contain the agreement of the Tenant(s) to abide by all the restriction contained in the Governing Documents and shall be deemed to provide that a violation thereof is grounds for damages, termination, and eviction, and that the Owner and Tenant agree that the Association may proceed against the Owner and Tenant and that the Owner shall be responsible for the Association's costs and expenses, including attorney's fees and costs, secured by a lien against the Parcel (Pursuant to the Governing Documents).