

A Florida Not-For-Profit Corporation  
**PORT BELLEAIR NO. 2 ASSOCIATION, INC.**

**LEASE APPLICATION**

NOTE: A \$100.00 NON-REFUNDABLE FEE FOR THE PROCESSING OF ANY TRANSFER OF USE BY LEASE, OR OTHER, IS DUE AT THE TIME THIS APPLICATION IS SUBMITTED. THIS ASSOCIATION WILL ALSO PERFORM A BACKGROUND CHECK ON EACH ADULT.

This application is for: LEASE \_\_\_\_\_ CO-RESIDENT \_\_\_\_\_

LEASE PERIOD – FROM: \_\_\_\_\_ TO \_\_\_\_\_

ADDRESS OF PROPERTY: \_\_\_\_\_

NAME OF PRESENT OWNER(S): \_\_\_\_\_

MAILING ADDRESS OF OWNER(S): \_\_\_\_\_

PERSONAL DATA OF LESSEE(S) OR ADULT OCCUPANT(S) OVER THE AGE OF 18 **SEPARATE APPLICATION AND FEE IS REQUIRED FOR OTHER THAN SPOUSE AND BONA FIDE DEPENDANT.**

NAME: \_\_\_\_\_ BIRTH DATE \_\_\_ / \_\_\_ / \_\_\_ PHONE: \_\_\_\_\_

DRIVER'S LICENSE NO: \_\_\_\_\_ VEHICLE #1: \_\_\_\_\_

SOCIAL SECURITY: \_\_\_\_\_ (required)

NAME: \_\_\_\_\_ BIRTH DATE \_\_\_ / \_\_\_ / \_\_\_ PHONE: \_\_\_\_\_

DRIVER'S LICENSE NO: \_\_\_\_\_ VEHICLE #1: \_\_\_\_\_

SOCIAL SECURITY: \_\_\_\_\_ (required)

CURRENT ADDRESS: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

LESSEE'S FORMER LANDLORD ADDRESS/PHONE: \_\_\_\_\_

LESSEE(S): (if retired, prior employment)

CURRENT EMPLOYER: \_\_\_\_\_ PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

FORMER EMPLOYER: \_\_\_\_\_ PHONE: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

ANY OTHER NON-RELATED ADULT APPLICATION MUST COMPLETE A SEPARATE APPLICATION FORM.  
PLEASE LIST THE NAMES OF OTHER FAMILY MEMBERS WHO WILL OCCUPY THIS UNIT WITH THE OWNER OR LESSEE(S):

\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER BEEN EVICTED? \_\_\_\_\_  
HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_\_

HAVE YOU EVER BEEN IN LITIGATION WITH LANDLORD OR CONDOMINIUM ASSOCIATION? \_\_\_\_\_

IF YES, PROVIDE DETAILS AS TO DATE, LOCATION AND OTHER PERTINENT INFORMATION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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NAME OF REAL ESTATE AGENT OR PERSON HANDLING TRANSACTION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

**LESSEE(S)**: AUTHORIZE THE ASSOCIATION OR MANAGING AGENT TO SECURE CREDIT AND ANY OTHER INFORMATION DEEMED NECESSARY IN APPROVING THIS APPLICATION. \_\_\_\_\_ (Initial)

**LESSEE(S)** HAVE RECEIVED AND READ THE RULES & REGULATIONS AND AFFIRM THAT SHE/HE/THEY WILL ABIDE BY ALL THE CONDITIONS AND TERMS OF SAID RULES AND REGULATIONS AS NOW ENACTED OR WILL BE DULY ENACTED IN THE FUTURE: \_\_\_\_\_

PROPOSED MOVE IN DATE: \_\_\_\_\_, IF LEASE, EXPIRATION DATE: \_\_\_\_\_  
NO LEASE SHALL BE FOR LESS THAN ONE (1) YEAR PERIOD.

**APPLICANT(S) SIGNATURE(S)**:

\_\_\_\_\_ DATE: \_\_\_\_\_ WITNESS: \_\_\_\_\_

\_\_\_\_\_ DATE: \_\_\_\_\_ WITNESS: \_\_\_\_\_

**DELIVER OR MAIL TO:**

Port Belleair No. 2  
c/o Ameri-Tech Community Management, Inc.  
24701 US Highway 19 North, Suite 102  
Clearwater, FL 33763