

## VIVIENDA WEST CONDOMINIUM ASSOCIATION

Mail to: Sunstate Management Association, PO Box 18809, Sarasota, FL 34276

APPLICATION FOR APPROVAL OF **LEASE** OF UNIT # \_\_\_\_\_ /ADDRESS: \_\_\_\_\_

Note: **Applications are to be submitted 30 days prior to leasing a unit.** Application Fee is \$150.00 **non-refundable.**

**Lease applicants must appear before the Associations Board for approval before unit occupancy.**

### CURRENT OWNER INFORMATION

<b>Owner Name #1:</b>	
<b>Owner Name #2:</b>	

REAL ESTATE COMPANY	REAL ESTATE CONTACT NAME	REAL ESTATE BROKER CONTACT #

### PROSPECTIVE **TENANT** INFORMATION

Note: As provided as an amendment to the Declaration of Condominium of Vivienda West, dated January 31, 2003, Vivienda West is an over-55 Condominium. Therefore, the Board of Directors must ascertain that residents are, in fact, 55 years of age or older. It is requested that you provide a copy of a valid driver's license, birth certificate or other proof of age of all lessee's and occupants along with this application. **Not more than 4(four) persons can occupy a unit and all must be at least 18 years of age.**

DESCRIPTION	NAME	OCCUPATION (If retired, last occupation)	CONTACT PHONE #	BIRTH DATE	DRIVER LICENSE STATE & NUMBER
Lessee #1:					
Lessee #2:					
Occupant #1:					
Occupant #2:					
Occupant #3:					
Occupant #4:					

### 2 PERSONAL & 2 CREDIT REFERENCE INFORMATION

DESCRIPTION	NAME	ADDRESS	TELEPHONE NUMBER
Personal #1:			
Personal #2:			
Credit #1:			
Credit #2:			

**PETS:** Limited to 1 cat OR 1 dog weighing under 25 pounds at adulthood. Note: The following breed of dogs are not permitted - Pit Bull, German Shepherd, Doberman Pinscher, Rottweiler, Chow Chows or Bull Mastiff

Type of Pet to Occupy the Unit (if any):

I/We, the undersigned, have read the Declaration of Condominium, the By-Laws, the Rules and Regulations of Vivienda West Condominium Association and agree to abide by the same.

PARTY	PRINTED NAME	SIGNATURE	PARTY	PRINTED NAME	SIGNATURE
Buyer #1:			For Mortgage or Trust (if any):		
Buyer #2:			VWCA Board of Directors:		
Date:			Date:		

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## TENANT (LESSEE) CONTACT INFORMATION

Please complete this form, sign at the bottom, and submit to Sunstate Management at the above address or via email to:

<b>UNIT OWNER NAME(S):</b>				
<b>OFFICIAL MAILING ADDRESS:</b>				
<b>CITY/STATE/ZIP:</b>				
<b>*CELL PHONE(S) (see note below):</b>	<b>Cell #1:</b>	<b>Initials:</b>	<b>Cell #2:</b>	<b>Initials:</b>
<b>HOME PHONE:</b>				
<b>EMAIL ADDRESS #1:</b>				
<b>EMAIL ADDRESS #2 (if any):</b>				
<b>EMERGENCY CONTACT NAME:</b>				
<b>EMERGENCY CONTACT ADDRESS:</b>				
<b>EMERGENCY CONTACT CITY/STATE/ZIP:</b>				
<b>EMERGENCY CONTACT TELEPHONE:</b>				

### PERMISSIONS – PLEASE CHECK ALL THAT APPLY:

PURPOSE	CONTACT TYPE	PERMISSIONS YES/NO	
<b>VWCA TELEPHONE DIRECTORY:</b> <ul style="list-style-type: none"> <li>▪ Distributed to all unit owners and posted on the “Residents Only” Password Protected portion of our web site.</li> </ul>	<b>CELL PHONE</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<b>HOME PHONE NUMBER</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<b>EMAIL #1</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<b>EMAIL #2</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<b>VWCA OFFICIAL LETTERS/LEGAL NOTICES:</b> <ul style="list-style-type: none"> <li>▪ Annual Meeting Notices</li> <li>▪ Annual Budget Meeting Notices</li> <li>▪ Year-End Financial Reports, Member Meeting Notices as required by our Declaration</li> <li>▪ Document changes to our Rules and Regulations, By-Laws, Declaration of Condominium, etc.</li> </ul>	<b>EMAIL #1</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<b>EMAIL #2</b> Please also complete the “Consent Form for Electronic Distribution” if you have not already done so.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<b>VWCA SOCIAL OR OTHER ACTIVITY NOTICES:</b> <ul style="list-style-type: none"> <li>▪ For example, Breakfast, Lunch or Dinner, Hot Dog Roast, Marina Jack Cruise, etc.</li> </ul>	<b>EMAIL #1</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<b>EMAIL #2</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

\* Note: Please include the initials of the cell phone owner so we can differentiate between multiple unit owner cell numbers, i.e. John & Mary Doe each have a cell phone. Initials next to John’s = JD; Initials next to Mary’s = MD.