

VANDERBILT LAKES COMMUNITY SERVICES ASSOCIATION, INC.
LEASE APPLICATION

Must be approved no less than twenty (20) days prior to first day of rental.

OWNER INFORMATION

Property I/we wish to lease in Vanderbilt Lakes Community Services Association

Owner's Name: _____

Address of Rental Property: _____

Owners Contact Address: _____

Florida Phone No. _____

Dates of Lease: From: _____ To: _____

Minimum rental period of thirty (30) consecutive days with maximum of four (4) rentals in any calendar year.

Owners Signature: _____

1. Applicant Information

Name: _____

Address: _____

City/state _____ Zip: _____

Email: _____

Full Name of Spouse: _____

Email: _____

Home Phone: _____ Business Phone: _____

Cell: _____

2. Motor Vehicles to be kept at rental property

Model/Make _____ Year: _____ Color: _____

License Plate No. _____ State: _____

Model/Make _____ Year: _____ Color: _____

License Plate No. _____ State: _____

3. Person to be notified in case of emergency

Name: _____

Address: _____

City/State: _____ Zip: _____ Phone: _____

I/We the undersigned proposed tenants of the property indicated, do hereby agree to be bound by the Covenants and Restrictions, by-laws, Rules and Regulations of Vanderbilt Lakes Community Services Association, Inc.

Applicants Signature: _____ Date: _____

Applicants Signature: _____ Date: _____

Please return:

- A. The signed rental application
- B. A **non-refundable** check for \$100 payable to
Vanderbilt Lakes Community Service Association

**To:
Collier Financial, Inc.
4985 Tamiami Trail East
Naples, FL 34113
Tel: (239) 774-7088**

For Property Management & Board use

Approved _____ Not Approved _____ Authorized Representative _____ Date _____