

Rookery Bay Maintenance, Inc.

c/o Sunstate Association Management, Inc.
P.O. Box 18809, Sarasota, FL 34276
Office (941) 870-4920 Fax (941) 870-9652

APPLICATION TO LEASE A UNIT

A non-refundable screening fee of \$100.00 and photo ID must accompany this application payable to Sunstate Association Management, Inc. The \$100 fee covers a single renter or a couple. Each additional resident over the age of 18 must also pay a non-refundable \$100 screening fee and provide a photo ID.

The undersigned proposes to lease: # _____ Perico Pointe Circle. The undersigned does hereby apply for approval of this lease, by the Rookery Bay Maintenance, Inc to which the following information is submitted. I understand that any outstanding sums due to Rookery Bay Maintenance, Inc must be paid prior to or at closing, for the applicant to get clear lease approval.

Homeowner Information

Owner's Name: _____

Owner's Telephone & Email: _____

Owner's Address _____

Leasing Agent/Company: _____

Leasing Agent/Company's Telephone & Email _____

Proposed Lease Dates: From _____ To _____

I agree to the following: Tenants will not be allowed to have pets. All renters or other occupants are subject to the rules and regulations set forth in the Rookery Bay Official Documents and additional rules and regulations that have been mandated by the state or approved by Rookery Bay owners. Therefore, it is the responsibility of unit owners to inform renters of the rules and regulations.

Owner Signature: _____ Date: _____

Applicant Information

Name of Applicant: _____ Telephone: _____

Name of Spouse/Co-Occupant: _____ Telephone: _____

Email: _____ Email: _____

Present Address: _____

Employer/Occupation: _____ Telephone: _____

Driver's License # _____ Driver's License # _____

Vehicle(s) on property:

Year Make/model STATE/tag #

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Applicant Information Continued

Year Make/model STATE/tag

ALL OTHER PERSONS WHO WILL OCCUPY THIS UNIT WITH YOU (Limit 2 persons per bedroom):

#1. Name _____ Relationship _____ Age _____

#2. Name _____ Relationship _____ Age _____

#3. Name _____ Relationship _____ Age _____

#4. Name _____ Relationship _____ Age _____

AUTHORIZATION OF RELEASE OF INFORMATION

Applicant(s) represent that all of the information and statements for lease are true and complete, and hereby authorize an investigative consumer report including, but not limited to, residential history, employment history, criminal records and credit reports. I am aware that any falsification or misrepresentation of the facts in this application will result in immediate rejection of this application. A photo ID required for all persons over 18 years of age.

Applicant

Social Security #: _____ Date of Birth: _____

(Personal information will be redacted prior to submitting for approval to the Board).

Co-Applicant

Social Security #: _____ Date of Birth: _____

(Personal information will be redacted prior to submitting for approval to the Board).

The undersigned has received a copy of the Association Documents: By-Laws, the Rules and Regulations and the Pool Rules of Rookery Bay Maintenance Inc. and agree to abide by them.

Signed: _____ Date: _____

Signed: _____ Date: _____

**IF THIS APPLICATION IS INCOMPLETE, IT WILL BE
RETURNED TO APPROPRIATE PERSON OR AGENT**

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ACTION BY BOARD OF DIRECTORS:

Approved _____ Disapproved _____

Signed: _____
Officer of Rookery Bay Maintenance, Inc

Date: _____

Perico Bay Club

Gate Entry Information

Unit: _____ sold or : _____ rented
(circle one)

Association Name _____

Unit Address _____

Current Owner _____

Closing or lease
Date(s) _____

New Owner(s) or renters

Name(s) _____

Address _____

Phone number(s) _____

Email(s) _____

Vehicle #1 _____

Make	Model	Year	Plate
------	-------	------	-------

Vehicle #2 _____

Make	Model	Year	Plate
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Approved By Management Company _____

Name	Company
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Date _____

Sunstate to Email: pericobayguardone@gmail.com

Please allow 3 days prior to closing.

Thank you,
Perico Bay Security