Windrush Bay Condominium Association, Inc.

c/o Ameri-Tech Community Management, Inc.

24701 US Hwy 19 N, Ste 102, Clearwater, FL 33763 P: (727) 726-8000 ext. 356 | F: (727) 723-1101 Ashley Moore, LCAM amoore@ameritechmail.com

LEASE APPLICATION

At least two weeks prior to occupancy, a tenant **MUST** complete this application and return it to Ameri-Tech Community Management at the address above along with a non-refundable \$100.00 fee made payable to **WINDRUSH BAY CONDOMINIUM ASSOCIATION**.

INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT APPROVAL

Basic Requirements

Revised: 07/16/2019

- Minimum lease period shall be three (3) months or maximum of twelve (12) months
- Must be filed each time there is a new tenant
- Copy of lease agreement must be attached
- Copy of driver license(s) must be attached
- Application fee

All the governing documents of the Windrush Bay Condominium Association shall apply to any tenant. Any change(s) to the original approved application shall require a newly completed application. Please note, Ameri-Tech Community Management, Inc. will request a background check prior to purchase approval.

Current Owner Name:	Unit:
Property Address of Unit:	
Tenant Information:	
Applicant	Co-Applicant
Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Driver's License #: State:	Driver's License #: State:
Date of Birth:	Date of Birth:
Telephone:	Telephone:
E-mail:	E-mail:
Children (Under 18):	Children (Under 18):
Name: Age:	Name: Age:
Name: Age:	Name: Age:
Number of other residents (Age 18+):	Number of other residents (Age 18+):
Name: DOB:	Name: DOB:
Name: DOB:	Name: DOB:
Years at Previous Address:	Years at Previous Address:
☐ Own ☐ Rent Payment/Month: \$	☐ Own ☐ Rent Payment/Month: \$
Landlord's Name:	Landlord's Name:
Phone:	Phone:
Reason for moving:	Reason for moving:
Banking Information:	
Name of Bank:	Name of Bank:
☐ Checking ☐ Savings	☐ Checking ☐ Savings
Bank Location:	Bank Location:
Pet Information: One (1) pet allowed, not to	o exceed 20 lbs. when fully grown.
Pet: ☐ Yes ☐ No	If yes, type:
Weight: lbs.	Vet Name: Last Vaccine:

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amoore@ameritechmail.com

Other:	
Waterbed? ☐ Yes ☐ No	Waterbed? ☐ Yes ☐ No
Vehicle Information:	
PLEASE NOTE: Trucks/Commercial Vehicles/	/Motorcycles are NOT allowed to be parked on
	pperty overnight. This also applies to all visitors.
Number of Vehicles:	porty overnight this also applies to all violeter
1. Make:	2. Make:
Model:	Model:
Year:	Year:
Color:	Color:
License Plate:	License Plate:
State:	State:
State.	Glate.
Applicant's Employer Information:	
Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip: Phone:
1 1101101	
Occupation:	Occupation:
How Long:	How Long:
Dravida Three (2) Deferences	
Provide Three (3) References:	
Name/Phone	Name/Phone
Landlord:	Landlord:
Employer:	Employer:
Other:	Other:
In Case of Emergency – Provide Three (3) Co	
1. Name:	Phone:
Address:	City: State: Zip:
2. Name:	Phone:
Address:	City: State: Zip:
3. Name:	Phone:
Address:	City: State: Zip:
Lease Data:	
Realtor/Firm Name:	
Contact Name:	Lease Start Date:
Address:	End Date:
City: State: Zip:	
Phone:	Fax:
E-mail:	
If Realtor is not involved please list informati	ion of person or company handling leasing agreeme
(attorney, title company, etc.):	2. posess. or company manaming loading agreemen
Name:	Phone:
Address:	City: State: Zip:
E-mail:	Fax:
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Revised: 07/16/2019

Windrush Bay Condominium Association, Inc.

By signing below, I attest that all of the information provided in this application is true and correct to the best of my knowledge and I authorize the Association and/or Ameri-Tech Community Management to conduct a background check or other investigation to verify the information int his application.

Furthermore, I hereby acknowledge that I have received a copy of, read and understand the Association's Governing Documents and agree to abide by all of the Association's Governing Documents.

In signing, you will ensure the tenants will comply or you will be legally liable for any violations they incur.

Note: All rules must be adhered to, or lease will not be renewed.

<u>NOTE</u>: No person(s) shall be permitted to occupy a unit without approval of this application by the Board of Directors of Windrush Bay Condominium Association. Driver's license number(s) and social security number(s) are used for background checks and will be removed from the form prior to distribution to the Association.

Tenant Applicant's Signature	Date
Tenant Applicant's Signature	 Date
Owner/Agent's Signature	 Date
Owner/Agent's Signature	

At least fourteen (14) days prior to occupancy, complete the following steps:

- Complete application in its entirety
- Return application to real estate agent/authorized agent
- Real estate agent/authorized agent is to forward application, sales agreement and fee to address
 above

Ameri-Tech Community Management, Inc. will process the application/agreements and forward to the Board of Directors for review and approval. Upon completion of this process and approval of this document, and provided all parties agree with Windrush Bay Condominium Association, Inc. Governing Documents, the new owner may begin the process of occupying the unit.

IT IS AGAINST THE LAW TO DISCRIMINATE AGAINST PROSPECTIVE TENANTS ON THE BASIS OF RACE, RELIGTION, NATIONAL ORIGIN, AGE OR DISABILITY. LOCAL OR STATE LAWS MAY INCLUDE ADDITIONAL CLASSES WHICH ARE PROTECTED FROM DISCRIMINATION IN HOUSING.

		THARE I ROTEOTED I ROM DIOCKI	
	ted by Association:		
☐ Approved	☐ Denied, reason:		_
		Date:	_
Board/Manage	ment Company Signature		