

# Windrush Bay Condominium Association, Inc.

## c/o Ameri-Tech Community Management, Inc.

24701 US Hwy 19 N, Ste 102, Clearwater, FL 33763

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### 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 \$150.00 fee made payable to **WINDRUSH BAY CONDOMINIUM ASSOCIATION**.

#### INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT APPROVAL

#### Basic Requirements

- **Minimum lease period shall be at least 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)**
- **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 new 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: \_\_\_\_\_

Current Owner PHONE: \_\_\_\_\_

Current Owner EMAIL: \_\_\_\_\_

#### **Tenant Information**

Applicant			Co-Applciant		
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:		
<b>Number of other tenants:</b>					
Name:			Date of Birth:		
Name:			Date of Birth:		
Years at Previous Address:			<input type="checkbox"/> Own <input type="checkbox"/> Rent Payment/Month: \$		
Landlord's Name:			Phone:		
Reason for moving:					
Name of Bank:			<input type="checkbox"/> Checking <input type="checkbox"/> Savings		
Bank Location:					
Waterbed? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>PLEASE NOTE: One (1) pet maximum, not to exceed 20 pounds when full grown.</b>					
Pet? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, type:		
Weight: lbs.					

# Windrush Bay Condominium Association, Inc.

**Vehicle Information:**

**PLEASE NOTE:** Trucks/Commercial Vehicles/Motorcycles are NOT allowed to be parked on Windrush Bay Condominium Association property overnight. This also applies to all visitors.

<b>Number of Vehicles:</b>	
1. Make:	2. Make:
Model:	Model:
Year:	Year:
Color:	Color:
License Plate:	License Plate:
State:	State:

**Applicant's Employer Information:**

Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Occupation:	Occupation:
How Long:	How Long:

**Provide Three (3) References:**

Name	Phone
Landlord:	
Employer:	
Other:	

**In Case of Emergency – Provide Three (3) Contacts:**

1. Name:	Phone:
Address:	City: State: Zip:
2. Name:	Phone:
Address:	City: State: Zip:
3. Name:	Phone:
Address:	City: State: Zip:

**Lease Date:**

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 information of person or company handling leasing agreement (attorney, title company, etc.):	
Name:	Phone:
Address:	City: State: Zip:
E-mail:	Fax:

**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 in this 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.**

