#### Casa Del Sol

### Alhambra, Barcelona, Cadiz & Madrid Condominium Association(s), Inc.

c/o Ameri-Tech Community Management 24701 US Hwy 19 N, Ste 102, Clearwater, FL 33763 Jenny Kidd, LCAM

jkidd@ameritechmail.com

P: (727) 726-8000 ext. 247 | F: (727) 723-1101

## **APPLICATION FOR SALE OR LEASE**

	To ensure that your application is processed, please remit the following:										
	☐ Application with all fields completed and signed by applicant(s)										
	$\square$ \$75 application and background check fee mad payable to Casa Del Sol. Check or										
	money order only. Non-refundable										
	☐ Copy of Sales Contract/Lease Agreement										
	☐ Copy of Driver's License (anyone 18 yrs of age and older)										
	Unit must be leased for a period of <u>no less than 4 months</u> consecutive duration per Condominium Rules & Regulations. Applicant(s) may not take possession of the unit until orientation has been completed and approval has been granted by the Board of Directors.										
Unit	#:, located at										
Closi	ing Date:/ Te	erm of Lea	ase: From	// To/_	/						
Closi	ing/Rental Agent:			Phone: ()							
Nam	e of Unit Owner(s):			Phone: ()							
Appli	icant Name:			SSN:							
Co-A	Applicant Name:			SSN:							
Curre	ent Address:										
Appli	icant Phone: ()	Co-	Applicant Phon	ne: ()							
Appli	icant Email:		Co-Applica	nt Email:							
Appli	icant Date of Birth://		Co-Applica	nt Date of Birth:/	/						
Busi	ness Name:			Position:							
Busi	ness Address:			Bus Phone: ()							
List N	Name(s) of Other Person(s) Who V	Vill Occup	y Unit:								
Nam	e:	_ Age:	Name:		_ Age:						
Nam	e.	Age.	Name:		Age.						

### Casa Del Sol

# Alhambra, Barcelona, Cadiz & Madrid Condominium Association(s), Inc.

No Commercial Vehicles, Boats, Trailers, Motorcycles, Pick-Up Trucks Allowed on Property.

Auto License Plate: _	State: Year/Make/Model:									
Auto License Plate: _	State:	Year/Mal	ke/Model:	Model:						
Emergency Contact N	lame:			Phone: (_	)	<del>-</del>				
	One Pet Up to									
Type of Pet:	Weight at Maturity:									
If Damage Occurs t		pperty While ible for Payn	_		, the C	wner Will Be				
Signing below mean	s that you have read	l and will abid	e by the assoc	ciation docume	ents of	Casa Del Sol.				
Signature:				Date:	/	_/				
Signature:				Date:	/	_/				
Applicant(s) represents that the information provided herein is true and correct and hereby consents and authorizes, by signature, the release of public records, credit report, employment verification, rental or lease information, whether by fax, verbal, photo copy or original signature, to the Association's Board of Directors or its agent now or in the future.										
Applicant Signature	Dat	e A	Applicant Signature		_	Date				
Date application received This application has be Association.  If disapproved, explan	een □ Approved	 □ Disapp		y the Board of						
Acknowledged by:										