

AVIAN PLACE HOMEOWNERS ASSOCIATION
CONSECUTIVE YEAR RETURNING
SEASONAL RENTAL APPLICATION

AVIAN PLACE
AT
PROVINCE PARK

Please read this application carefully and fill in all blanks.

BACKGROUND CHECKS ARE REQUIRED TO BE COMPLETED FOR ALL OCCUPANTS 18 YEARS OF AGE OR OLDER PRIOR TO APPROVAL OF RENTAL APPLICATION.

For domestic and international background checks, please go to <http://www.americhckusa.com/SchooMgmt>. Applicants are required to pay all fees associated with background checks.

The background check company should send the completed background check(s) directly to reception@samcam.biz at Schoo Association Management. Schoo will NOT accept background checks directly from the applicant(s) or any other individual, it must come from the vendor.

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There is a **\$100.00** non-refundable application fee for returning seasonal rentals who have previously rented in Avian Place and are returning to rent in Avian Place for a consecutive calendar year. Checks should be made payable to Avian Place Homeowners Association. Copies of driver's license(s) or State Issued ID(s) are required with the application, for any occupant age 18 and over.

PLEASE SUBMIT THIS APPLICATION AND ALL REQUIRED ITEMS AT LEAST TWENTY (20) DAYS PRIOR TO THE START OF YOUR LEASE.

Send completed application to:

Schoo Association Management, LLC
9403 Cypress Lake Drive, Suite C
Fort Myers, FL 33919

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Please Note: If you did not rent a villa in Avian Place during the previous calendar year, you must complete the regular rental application form.

Application date: _____

Lease Period: from: _____ to: _____

Previous rental period in Avian Place: From: _____ to: _____

Previous Avian Place Rental Address:

Homeowner's Name & Address:

Telephone Number _____

Realtor's/Rental Agent's Contact Information:

Name: _____ Telephone Number: _____

Agency: _____

Are Any Rental Applicant(s) Veterans? YES _____ NO _____
(If yes, please attach a copy of your Military ID or DD Form 214)

Rental Applicant's Name and Contact Information:

Name: _____ Telephone Number: _____

Email: _____

Spouse/ Significant Other's Name: _____

Email: _____

Current Address:

Occupants other than rental applicant: (Please list additional occupants on a separate sheet of paper)

1) Name: _____ Age: _____

Relation to Rental Applicant:

2) Name: _____ Age: _____

Relation to Rental Applicant:

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Rental Applicant Presently Employed By:

Personal References:

1. _____ Phone number: _____

2. _____ Phone number: _____

Type of vehicle: _____ License Plate Number: _____

Type of vehicle: _____ License Plate Number: _____

In case of emergency, contact:

I/we mutually agree and understand that in the event the Association has cause to send three (3) violations to the landlord, tenant, or both during the term of lease, the landlord will comply with the Association's request to evict as quickly as possible and reasonable, any tenant who will not follow the Association's Rules & Regulations and Use Restrictions.

Signature _____ **Date** _____

Signature _____ **Date** _____

I/we mutually agree and understand all lease renewals must be submitted to the Schoo Association Management office located at 9403 Cypress Lake Drive Suite #C Fort Myers, FL 33919 if I/we decide to renew when our current lease expires.

Signature _____ **Date** _____

Signature _____ **Date** _____

I/we mutually agree and understand any visitor staying beyond 21 days must be added to the lease and a background check will be required.

Signature _____ **Date** _____

Signature _____ **Date** _____

I/we agree to abide by all of its provisions and those of recorded documents and by all Rules & Regulations made pursuant thereto.

Signature _____ **Date** _____

Signature _____ **Date** _____

I hereby certify that on the _____ day of _____, 2_____, personally appeared before me,

_____, known to me to be the individual described in and who executed the same freely and voluntarily for the purpose therein expressed.

Commission expires: _____

Notary Public _____

State of _____

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IMPORTANT INFORMATION FOR DOG OWNERS

PLEASE CONFIRM BELOW IF YOU ARE A DOG OWNER BY MARKING THE APPROPRIATE SPACE:

YES _____ **NO** _____

If yes, is this an emotional support animal or service animal? YES _____ NO _____

If you responded **Yes**, you must complete all requested information and provide all items required. Failure to complete all information and to provide all the required items will result in this application being denied by the Avian Place Homeowners Association, eviction and possible fines if it is determined that you attempted to bypass this process by not acknowledging your ownership of dog(s) and providing required information and fee(s) to the Association. Dogs cannot be brought of Avian Place property without prior approval.

DOG OWNERS MUST REVIEW ALL ITEMS ON THIS PAGE OF THE APPLICATION AND PROVIDE EACH ITEM REQUESTED BY THE AVIAN PLACE HOMEOWNERS ASSOCIATION

I/We Understand The Avian Place Homeowners Association Prohibits Aggressive Breeds

(All Applicants Initial Here)

I/We Understand The Avian Place Homeowners Association Only Allows Two (2) Dogs Per Household.

(All Applicants Initial Here)

I/We Understand Renters Are Not Permitted To Have Dogs Weighing More Than Thirty-Five (35) Pounds.

(All Applicants Initial Here)

Dog Information:

Name of Dog: _____ **Dog Breed:** _____ **Weight:** _____ **Color:** _____

Name of Dog: _____ **Dog Breed:** _____ **Weight:** _____ **Color:** _____

ALL ITEMS LISTED BELOW MUST BE PROVIDED WITH THIS APPLICATION

- 1) **A Limit of Two (2) Dogs Per Home, No Aggressive Breeds, Weight Limit of Thirty-Five (35) Pounds.**
Emotional support and service animals require documentation and must be submitted with the rental application. Paperwork can be obtained from Schoo Association Management or in the Documents and Forms section of the Avian Place HOA web site: www.avianplacehoa.com.
- 2) **Record of Current Shots and Weight Records from a Licensed Veterinarian.**
- 3) **Clear Photograph of Each Dog.**
- 4) **Clear Photograph of Each Dog's Tag. Tag Must Include Name of Dog and Owner's Phone Number.**

As a dog owner(s), I/we understand that failure to provide all required information listed above will result in immediate denial of this rental application. Furthermore, I/we understand that I/we may be subject to fines or eviction by the Avian Place Homeowners Association if I/we do not inform the Association that I/we own a dog(s) prior to occupying the home or if I/we add a dog(s) after establishing residency in the Avian Place community without prior approval.

RENTER'S SIGNATURE: _____

RENTER'S SIGNATURE: _____

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ELECTRONIC NOTICE AUTHORIZATION

I/we, _____, authorize the Avian Place Homeowners Association Board of Directors; Province Park Master Association; and Schoo Association Management to provide notices of business of the Association to me electronically by email. This authorization will remain in effect until cancelled.

Name: _____

Avian Address: _____

Email Address: _____

Signature: _____

PROVINCE PARK MASTER ASSOCIATION

I/we have received, read, and understand the Rules and Regulations governing the Community regarding pets, parking, use of amenities, nuisances, everything covered in the documentation.

I/we understand that I/we will be responsible for all occupants and guests in my home.

I/we understand that any damages to the gate system, by myself, any occupants of my home, or any of my guests, will be my financial responsibility. The minimum charge will be Two Hundred and Fifty dollars (\$250.00).

All members of a community association are legally required to follow the rules and regulations. While it may seem restrictive, these rules are in place to protect your investment and provide a common framework for residents in a safe and secure environment.

The responsibility is on the property owner(s) to ensure that the Rules and Regulations are understood and adhered to.

I/we, _____, am/are truthful in the declaration that the Rules and Regulations have been read and are understood. Non-compliance may lead to eviction or fines being imposed. Your first Non-compliance letter is free (no charge). If a letter must be sent via USPS, there will be a \$40 fee. There will be a \$50 fee for the second Non-compliance letter sent, increasing to \$100 per letter for the third and all consecutive Non-compliance letters (total \$100 fee for second letter and \$200 every letter thereafter) regarding the same infraction.

Dated: _____

Owner: _____

Owner: _____

NOTE: Signature(s) authorizes the Association to secure credit and other information.

Signature(s): _____

Signature(s): _____

I hereby certify that on the _____ day of _____, 2____, personally appeared before me, _____, known to me to be the individual(s) described in and who executed the same freely and voluntarily for the purpose therein expressed.

Commission expires: _____

Notary Public Signature: _____

State of _____