

**Village at Stoneybrook Condominium Association, Inc.**  
c/o Tropical Isles Management Services, Inc.  
12734 Kenwood Lane, Suite 49  
Fort Myers, FL 33907  
Phone (239) 939-2999 Fax (239) 939-4034  
**Kayla@tropicalisles.net**

**Leasing Procedure & Checklist for Villages at Stoneybrook**

Dear Homeowner/Leasing Agent:

Attached to this letter you should have received the following items pertaining to your lease in the Villages at Stoneybrook:

1. Village at Stoneybrook Lease Registration Form
2. Village at Stoneybrook Assignment of Rents Form
3. Village at Stoneybrook Commons Access Control/Parking Decal Authorization
4. Village at Stoneybrook Commons Vehicle Registration Form
5. Village at Stoneybrook Rules & Regulations

Please note the following items that must be included in your lease registration packet returned to the management company prior to having your lease reviewed and signed off on by the Villages at Stoneybrook:

- \_\_\_\_ 1. Leasing Procedure & Checklist for Villages at Stoneybrook signed by owner or leasing agent.
- \_\_\_\_ 2. Completed Villages at Stoneybrook Lease Registration Form
- \_\_\_\_ 3. Completed Village at Stoneybrook Assignment of Rents Form
- \_\_\_\_ 4. Copy of executed lease agreement between owner and tenant
- \_\_\_\_ 5. Criminal Background check for each adult residing in the unit as listed on the lease form  
**NOTE: The Association will only review forms from those companies listed on the Lease Registration Form.**
- \_\_\_\_ 6. Completed Villages of Stoneybrook Commons Access Control/Parking Decal Authorization Form
- \_\_\_\_ 7. Completed Villages of Stoneybrook Commons Vehicle Registration Form
- \_\_\_\_ 8. Copies of valid insurance card, driver's license and vehicle registrations for each vehicle.
- \_\_\_\_ 8. Check written to Tropical Isles in the amount of \$100.

The aforementioned items should be mailed/dropped off at Tropical Isles Management for processing. Your paperwork will be reviewed and the owner/leasing agent will receive an official letter acknowledging the lease, the tenants and the lease dates. Upon receipt of this document, the tenant (s) will need to contact Kate Gregory and schedule an appointment to receive their parking decal (s) for their vehicle (s) **ONLY TWO ARE PERMITTED. Should the tenant wish to renew their lease, a lease renewal packet must be completed and returned to the management office thirty days (30) prior to the lease expiration date along with a \$50.00 renewal fee for processing. Please contact our office and we will gladly forward this packet to you.**

Best Regards,  
Kayla Matias  
Tropical Isles Management

Leasing Agent signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

# VILLAGE OF STONEYBROOK I, A CONDOMINIUM LEASE REGISTRATION

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This application must be submitted along with the items listed on the Leasing Checklist and a **\$100.00** non-refundable processing fee made payable to Tropical Isles Management (or as an alternative, a refundable security deposit of \$1,000 payable to the Association) at least fifteen (15) days prior to the start of any lease. Renewal applications must include a \$50.00 check payable to Tropical Isles Management Services for database updating. NO NEW TENANTS MAY MOVE INTO VILLAGE I WITHOUT REGISTERING WITH THE ASSOCIATION. A \$100 FINE WILL BE APPLIED TO THE LESSOR FOR ANY LEASE AGREEMENT ENTERED WITHOUT BOARD APPROVAL. NO LEASE MAY BE FOR LESS THAN A THIRTY (30) DAY PERIOD. NO PETS OF ANY KIND ARE PERMITTED IN LEASED UNITS. ALL LEASE RENEWALS MUST BE SUBMITTED TO THE ASSOCIATION THIRTY (30) DAYS PRIOR TO LEASE ENDING DATE ALONG WITH A \$50 LEASE RENEWAL FEE.

LEASED UNIT ADDRESS \_\_\_\_\_ UNIT # \_\_\_\_\_

UNIT OWNER INFORMATION (LESSOR) Email Address: \_\_\_\_\_

NAME \_\_\_\_\_ PHONE ( ) \_\_\_\_\_ CELL( ) \_\_\_\_\_  
PERMANENT ADDRESS: \_\_\_\_\_

LESSEE INFORMATION Lessee's Email Address: \_\_\_\_\_

LEASE DATE: FROM \_\_\_\_\_ TO \_\_\_\_\_

List Each Adult Living in Unit : \_\_\_\_\_  
PHONE ( ) \_\_\_\_\_ - \_\_\_\_\_ Cell ( ) \_\_\_\_\_ - \_\_\_\_\_

Each unit may only have TWO vehicles as only TWO parking decals are distributed at one time.

Will anyone other than those listed above occupy this unit? \_\_\_\_\_ No \_\_\_\_\_ Yes  
If yes, whom (list names, ages and relationship) ? \_\_\_\_\_

LEASING AGENT INFORMATION AGENCY/AGENT: \_\_\_\_\_  
☐ (Please initial) PHONE ( ) - \_\_\_\_\_ EMAIL: \_\_\_\_\_

A criminal background check has been completed on each lessee name listed above. Possible sources are as follows: Intelli Investigations, Owensonline, CriminalWatchDog.com or Application Processing Service, Inc. Copies of these background checks have been attached to this lease application for the association's review. (Place initials in box)

I have received and read a copy of the Village of Stoneybrook I Condominium Association's Rules and Regulations along with this application. I understand these Rules and Regulations and agree to abide by them as long as I reside at the Villages at Stoneybrook. I understand that, as a renter, failure to do so places me in breach of my lease agreement with the association and is cause for eviction.

☐ I understand tenants are ***not permitted to have pets*** in any leased unit at any time during the lease period.  
(Place initials in box)

☐ I understand commercial vehicles are not permitted anywhere on association property. I understand I may only have TWO VEHICLES at this community and must set an appointment at the management office to register my vehicles with the association in order to receive my parking decals. The owner of this unit must provide authorization to the association to release the parking decals to the tenant. I understand that my failure to register my vehicles will result in my vehicles being potentially towed. (Place initials in box)

☐ I understand that I must obtain (from my leasing agent or lessor), complete and submit the proper access forms before I may be given access community. I understand that my access items will be deactivated on my lease expiration date unless the proper lease renewal paperwork is submitted to Tropical Isles 20 days prior to the expiration. (Place initials in box)

☐ I understand as a tenant I am responsible to comply with all Rules & Regs both current and future for the Association. No items may be placed outside of the unit or in the entry areas without Association approval. **NO PROPANE OR CHARCOAL GRILLS ARE PERMITTED IN OR AROUND THE UNIT PER THE FIRE MARSHALL.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Unit Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Licensed Realty Agent \_\_\_\_\_ Date \_\_\_\_\_

MGMT or Board Signature \_\_\_\_\_ Date \_\_\_\_\_

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**Assignment of Rents**

This is an Addendum to the Lease between \_\_\_\_\_ (Owner) and  
\_\_\_\_\_ (Tenant), for \_\_\_\_\_ Unit  
\_\_\_\_\_, beginning on \_\_\_\_\_ (date of lease) and all renewals thereof.

In the event that an Owner is or becomes delinquent in the payment of assessments or other sums due and owing to the **Villages I of Stoneybrook Condominium Association, Inc.** the Association shall have the right and authority to collect the rent to be paid by the Tenant to the Owner directly from the Tenant. In the event such Tenant fails to remit said rent directly to the Association within ten (10) days from the day the Association notified such Tenant in writing that the rents must be remitted directly to the Association, but no later than the day the next rental payment is due, the Association shall have the right to terminate the lease and evict the Tenant. All sums received from the Tenant shall be applied to the Owner's account for the leased Unit according to the priority established in Section 718, Florida Statutes, until the Owner's account is current.

The terms of this Addendum are controlling over anything to the contrary in the Lease and cannot be modified without the prior written consent of the **Villages I of Stoneybrook Condominium Association, Inc.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**OWNER:**

Sign: \_\_\_\_\_  
Print: \_\_\_\_\_

**TENANT(S):**

Sign: \_\_\_\_\_  
Print: \_\_\_\_\_

Sign: \_\_\_\_\_  
Print: \_\_\_\_\_

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### ACCESS CONTROL AUTHORIZATION

**Keyless Transmitters, Parking Decals and Proximity Cards will not be distributed to tenants without this completed form returned to Tropical Isles Management.**

Date: \_\_\_\_\_

I \_\_\_\_\_ the owner of \_\_\_\_\_  
(Please print name) (Street Number) (Unit #)

Hereby give to Tropical Isles Management my expressed permission to:

(Select one of the following by placing your initials on the designated line and filling in the appropriate information)

\_\_\_\_\_ (1) Hold my Keyless Transmitters, Parking Decals and Proximity Card until I am able to retrieve them from the management office. I understand these items will NOT be mailed to me at my secondary address.

\_\_\_\_\_ (2) Distribute my Keyless Transmitters, Parking Decal and proximity cards to my tenant/tenants identified below:

(PLEASE PRINT) (Lease Registration Form must be on file with the association)

\_\_\_\_\_

PLEASE PLACE INITIALS ON LINES BELOW TO IDENTIFY  
YOU HAVE READ AND AGREE TO THE FOLLOWING TERMS:

\_\_\_\_\_ (1) I understand my tenants Keyless Transmitters, Parking decal and Proximity Cards will be deactivated on the lease end date and it will not be the association's responsibility to notify the tenant when the access items are deactivated.

\_\_\_\_\_ (2) I am aware of the Rules and Regulations of the Association. As such, I am familiar with the association's parking & towing rules as are my tenants.

\_\_\_\_\_ (3) I understand that while leasing my home I forfeit the right to have additional Keyless Transmitters or Proximity Cards for my personal vehicles.

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Owner Signature Phone Number

\_\_\_\_\_ \_\_\_\_\_  
Please Print Owners Name Email Address

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## VEHICLE REGISTRATION FORM

**OWNERS** Last Name: \_\_\_\_\_ First Name(s): \_\_\_\_\_  
Head of Household Only

Address: \_\_\_\_\_ Unit # \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ Fax: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_

Email: \_\_\_\_\_ 2<sup>nd</sup> Email: \_\_\_\_\_

**TENANTS** (if applicable) Last Name: \_\_\_\_\_ First Name(s): \_\_\_\_\_  
Head of Household Only

Address: \_\_\_\_\_ Unit # \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ Fax: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_

Email: \_\_\_\_\_ 2<sup>nd</sup> Email: \_\_\_\_\_

### UNIT VEHICLES

1<sup>st</sup> Vehicle Make: \_\_\_\_\_ Model \_\_\_\_\_ Tag #: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_

Owner(s): \_\_\_\_\_ Cell Phone: \_\_\_\_\_ DL # \_\_\_\_\_

2<sup>nd</sup> Vehicle Make: \_\_\_\_\_ Model \_\_\_\_\_ Tag #: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_

Owner(s): \_\_\_\_\_ Cell Phone: \_\_\_\_\_ DL # \_\_\_\_\_

**\*\*\*IMPORTANT\*\*\*** Please attach a copy of the vehicle registration for each vehicle on this form, an insurance card and attach a driver's license copy for each household licensed driver.

Each home will receive one (1) free Keyless Transmitter and one free (1) Proximity Card. Additional or replacement access items can be purchased at the below price.

<u>Item</u>	<u>Replacement or Additional Access Item Fee</u>	<u>Quantity **</u>	<u>Total Amount</u>
Keyless Transmitter	\$50	_____	\$ _____
Proximity Card	\$10	_____	\$ _____
			Total \$ _____

Please make checks payable to Villages of Stoneybrook.