

Application for Approval to Lease or Purchase
Tropical Cove HOA

Property Owner: _____ Telephone _____
(Print Name)

Email: _____

Mailing address: _____

() I hereby apply for approval **to purchase** _____ Unit # _____
(Address to be purchased)

A completed copy of the signed purchase agreement is attached.

() I hereby apply for approval **to Lease** _____ Unit # _____
(Address to be leased)

A completed copy of the signed lease agreement is attached.

In order to facilitate consideration of this application, I represent that the following information is factual and correct, and agree that any falsification or misrepresentation in this application will justify its disapproval. I consent to your further inquiry concerning this application, particularly of the references given below.

Please type or Print information below:

1. Full name of Applicant _____ Email _____
2. Full name of Spouse (if any) _____ Email _____
3. Current home address _____
4. Telephone Number _____ Cell # _____ Work _____
5. Place of Employment _____
6. Employment Address _____

The documents of the associations provide for the obligation of homeowners that all living units be used as single-family residence only. Please state the name and relationship of all other persons who will be occupying the unit on a regular basis.

Name: _____ Relationship: _____

Name: _____ Relationship: _____

7. Person to be notified in case of emergency.

Name: _____

Address: _____

City/State/Zip: _____ Phone # _____

8. Make of car (s) to be kept at the residence during lease term:
 Make/Model _____ Year _____
 License No. _____ State _____ Color _____
 Make/Model _____ Year _____
 License No. _____ State _____ Color _____

9. Alternate address for notices connected with this application:
 Name: _____
 Address: _____
 City/State/Zip: _____ Telephone () _____

10. If this transaction is a purchase, please check the item that applies:
 I am purchasing the unit with the intention to:
 Reside here on a full-time basis
 Reside here on a part-time basis
 Lease the unit

11. I (we) will provide the Association with a copy of our recorded deed within ten (10) days after closing.

12. I understand that, as a tenant, no pets are allowed

I am aware of, have received a copy of, and agree to abide by the Declaration of Covenants, By-laws and Rules and Regulations for Tropical Cove Homeowners Association.

Provide email address for electronic copy.

 (Applicant Signature)

 (Applicant Signature)

There is a \$50.00 application fee – make check payable to Vision Association Management and mail this completed application, lease or purchase agreement and the check to:

**Vision Association Management
 11691 Gateway Blvd., Ste. # 203
 Fort Myers, FL 33913**

- Application Approved
- Application Denied

 Authorized Vision Management Personnel

Date: _____

A copy of the approved application will be mailed or emailed to owner and/or applicant.