APPLICATION FOR SALE OR LEASE

TO: The Board of Directors of **Wild Pines at Bonita Bay**, a Condominium.

(Please check appropriate box below)OWNER NAME:_____

- () I hereby apply for approval to <u>purchase</u> unit ______at _____in Wild Pines, a Condominium, and for membership in the Condominium Association. <u>A complete copy of the signed purchase agreement is attached.</u>
- () I hereby apply for approval to <u>lease</u> unit ______in _____in Wild Pines, for the period beginning ______200___, and ending ______, 200___. <u>A complete copy of the signed lease is attached.</u>

<u>NOTE</u>: A Non-refundable application fee of <u>\$50.00</u> must be included with completed application, for either purchase or/a lease of 90 days or more. Make check payable & mail to: Wild Pines Condominium Association c/o Vesta Property Services, 27180 Bay Landing Drive Ste 4, Bonita Springs, FL 34135.

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 LEGIBLY THE FOLLOWING INFORMATION

1.	Full name of Applicant(s)		S.S. #
2. Ho	Full name of Spouse (if any)		S.S. #
Те	ome address elephone: Home()	Office	()
4. If r	Nature of Business or Profession retired, former business or profession		
5.	Company or Firm Name		
6.	Business Address Phone: ()		
to	The condominium documents of Wild Pines pro be used as single family residences only. Please no will be occupying the unit on a regular basis.		
8.	Name of current or most recent landlord		
Ac	ldress		
Cit	ty/State/Zip	Phone()
Na	Two personal references (local if possible)		
AC			
Cli	ty/State/Zip	Phone ()
Na	ame		
Ac	ldress		
Cit	ty/State/Zip	Phone()

APPLICANT IS AN ACTIVE MEMBER OF THE UNITED STATES ARMED FORCES? _____YES _____NO

10. Two credit references (local if possible)							
Name							
Address							
City/State/Zip	Phone ()					
Name							
Address							
City/State/Zip	Phone ()					
 Person to be notified in case of emergency: Name 							
Address							
City/State/ZipF	Phone ()					
12. Make of car to be kept at the Condominium during lease term:							
Model/Make			Year				
License No.			State				
 Mailing address for notices connected with this application: Name 							
Address							
City/State/Zip		_Phone()				
NameAddress		_Phone()				

14. (If this transaction is a **sale**, please circle the number that applies), I am purchasing this unit with the intention to:

(1) reside here part-time (2) reside here on a full-time basis (3) lease the unit

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

15. I am aware of, and agree to abide by the Declaration of Condominium for **Wild Pines** at Bonita Bay, a condominium, the Articles of Incorporation, By-laws and any and all properly promulgated rules and regulations. I acknowledge receipt of a copy of the Association rules.

16. I understand and agree that the Association, in the event it approves the **lease**, is authorized to act as the owner's agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by lessees and their guests, of provisions of the Declaration of Condominium of Wild Pines Association's by-laws, and the rules and regulations of the Association.

AUTHORIZATION: I/We hereby authorize Vesta Property Services, LLC and/or Wild Pines Condominium Association to verify all information contained on the application and conduct a full background check, including but not limited to credit, employment, income, eviction, and criminal and authorize that they contact any persons or companies listed on the application.

I/WE AGREE TO HOLD THE OWNERS AND THE CONDOMINUM ASSOCIATION HARMLESS AND TO RELEASE THEM OF ANY LIABILITY FOR ANY DISASTER, FORCE OF NATURE, ACCIDENT, OR UNFORESEEN EVEN THAT MAY AFFECT ME/US, MY/OUR GUESTS, OR THE CONDOMINIUM. I/WE FURTHER AGREE TO HOLD HARMLESS AND RELEASE FROM LIABILITY THE OWNERS AND THE CONDOMINIUM ASSOCIATION FOR ANY INJURY OR DEATH TO ME/US OR ANY OF MY/OUR GUESTS OR COMPANIONS RESULTING FROM MY/OUR USE OF THE PREMISES. THIS HOLD-HARMLESS CLAUSE APPLIES TO ALL OF WILD PINES, INCLUDING THE TENNIS AND POOL AREAS. THE POOL IS UNATTENDED, AND USE OF IT BY YOU OR ANY OF YOUR GUESTS OR COMPANIONS IS TO BE AT YOUR OWN RISK ALONE.

DATE	ED:	
	Applicant	
	Applicant	
	APPLICATION APPROVED DISAPPROVED	
DATE	= <u>·</u>	
BY:		
-	Officer or Director	