

**Marbella Isles Homeowner Association, Inc.  
C/O GRS MANAGEMENT ASSOCIATES, INC.  
3900 WOODLAKE BLVD., SUITE 309  
LAKE WORTH, FL 33461  
PHONE (561) 641-8554 / FAX (561) 641-9448**

**APPLICATION FOR LEASE**

- ( ) \$200 Application fee payable to: **GRS Management (non-refundable)**
- ( ) Copy of executed lease contract attached
- ( ) Copy of driver's license or Id attached

**No Certificate of Approval needed from Association.**

**Application must be delivered to GRS Management Associates office at above address and all documents must be submitted with the application.**

Contact: Property Manager: (239) 231-3479 or e-mail [rsilva@grsmgt.com](mailto:rsilva@grsmgt.com)

**Lease Application**  
**Marbella Isles Homeowner Association, Inc.**

*Please print legibly and complete all the sections*

LEASE BEGIN DATE:	LEASE END DATE:
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**UNIT INFORMATION**

PROPERTY ADDRESS	MOVE-IN DATE
CURRENT OWNER NAME	CONTACT #

**APPLICANT INFORMATION**

APPLICANT NAME	CO-APPLICANT NAME
PRIMARY CONTACT #	PRIMARY CONTACT #
EMAIL	EMAIL
CURRENT MAILING ADDRESS	CURRENT MAILING ADDRESS
CITY-STATE-ZIP	CITY-STATE-ZIP
EMERGENCY CONTACT NAME & TELEPHONE	EMERGENCY CONTACT NAME & TELEPHONE
MARTIAL STATUS      MARRIED (   )      SINGLE (   )	MARTIAL STATUS      MARRIED (   )      SINGLE (   )

**OTHER OCCUPANTS**

NAME	RELATIONSHIP	DOB
NAME	RELATIONSHIP	DOB
NAME	RELATIONSHIP	DOB

**REALTOR INFORMATION**

REALTOR'S NAME	PHONE #	EMAIL
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## **ADDITIONAL INFORMATION**

### **EMPLOYMENT HISTORY**

**ARE YOU:** Self-Employed? Yes ( ) No ( )      Retired? Yes ( ) No ( )

EMPLOYER	CO-APPLICANT/SPOUSE EMPLOYER
CITY-STATE-ZIP	CITY-STATE-ZIP
PHONE #	PHONE #
EMPLOYED FROM: TO:	EMPLOYED FROM: TO:
DEPARTMENT OR POSITION	DEPARTMENT OR POSITION
SUPERVISOR	SUPERVISOR
MONTHLY INCOME	MONTHLY INCOME

### **VEHICLE INFORMATION**

If you have any recreational vehicles, (vans, boats, motorcycles) please specify.

NOTE: Certain vehicles may be prohibited.

MAKE	MODEL	COLOR	STATE	TAG #
MAKE	MODEL	COLOR	STATE	TAG #
MAKE	MODEL	COLOR	STATE	TAG #

### **PET INFORMATION**

(Write none if no pets)

TYPE	BREED	RABIES LICENSE TAG #	COLOR	WEIGHT
TYPE	BREED	RABIES LICENSE TAG #	COLOR	WEIGHT

### **GATE ACCESS REQUEST**

TELEPHONE # TO PROGRAM INTO GATE SYSTEM	<u>OFFICE USE ONLY</u> GATE #
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**Marbella Isles Homeowner Association, Inc.**  
**ADDENDUM TO LEASE APPLICATION**

THIS ADDENDUM is made between \_\_\_\_\_ ("Landlord") and  
\_\_\_\_\_ ("tenant(s)") for unit: \_\_\_\_\_ effective this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_  
and is intended to and shall supplement, amend and modify that certain Lease dated \_\_\_\_\_, in the  
following respects:

1. Tenant(s) are subject to and shall abide by Florida Statutes: Assessments: Tenant Occupancy: Where an owner is delinquent in any monetary obligation to the Association, the Association can make a demand for the tenant to pay to the association the future monetary obligations related to the Association unit owed to the Association. The demand must be in writing. If the tenant fails to comply, the Association may have the tenant evicted in accordance with Florida Statutes. The unit owner shall give the tenant a credit against rent due to the unit owner for any amounts paid by the tenant to the Association.
2. In the event the landlord/owner becomes delinquent in payment of assessments (regular, general or special) or other charges to the Association, the Association may notify the tenant. Upon such notification, the tenant shall be obligated to pay the rent required under the lease to the Association, until all delinquent assessments and other charges have been paid in full. During the period of time the tenant is paying the rent to the Association, the landlord shall not seek to evict the tenant for non-payment of rent.

LANDLORD

\_\_\_\_\_

\_\_\_\_\_  
Printed Name

TENANT

\_\_\_\_\_

\_\_\_\_\_  
Printed Name

TENANT

\_\_\_\_\_

\_\_\_\_\_  
Printed Name