



MASTER ASSOCIATION APPLICATION FOR LEASE

INSTRUCTIONS & GUIDELINES

1. The attached application must be completed and signed by both the tenant(s) and homeowner(s). All fields must be completed; if any are left blank, the application may be automatically denied as an incomplete application. If the question does not apply, please write "N/A."
2. The completed application must be submitted to the Association office at **least twenty (20) days prior to the desired date of occupancy.**
3. Unregistered occupancy and occupancy prior to approval is strictly prohibited.
4. Units shall be used as a single-family residence only, and for no other purpose. No portion of a unit (other than the entire unit) may be rented. Sub-leasing is not permitted.
5. Lease terms may be no less than 30 days and not to exceed 12 months.
6. Villas and Condos require an additional application which must be submitted to the Villa or Condo Association. Contact the appropriate Management Company for details:

| | | | | |
|-----------|---|-------------------|-----------------------------|----------------|
| Lancaster | { | Pinecrest I & III | Tropical Isles Management | (239) 939-2999 |
| | | Pinecrest II & IV | Vision Management | (239) 561-1444 |
| Knighton | | Villas I | Alliant Property Management | (239) 454-1101 |
| Portrush | | Villas II | Vision Management | (239) 561-1444 |

DOCUMENTS AND FEES REQUIRED

1. Application completed in its entirety
2. A copy of the signed lease agreement between the homeowner and tenant
3. A copy of your pet's current vaccination records, if applicable
4. Each person over the age of 18 who is named on the lease and/or will occupy the home must submit a disclosure consent form, a character reference form, and the applicable fee listed below for a background check
5. Non-refundable application fees: *two separate checks - credit cards not accepted*

| | | |
|--|-----------------------|---|
| a. Processing fee | \$50.00 | Payable to: Alliant Property Management |
| b. Background check fee – US Citizen | \$40.00/person | Payable to: Alliant Property Management |
| – Non-US Citizen ¹ | \$45.00/person | Payable to Alliant Property Management |
| c. Application fee | \$50.00 | Payable to: Stoneybrook |
| d. Amenities Transfer fee ² | \$100.00 | Payable to: Stoneybrook |

| | |
|---|---------------------------------------|
| } | Please write one check for this total |
|---|---------------------------------------|

¹Non-US Citizens must also submit a clear, legible copy of their passport

²Amenities Transfer fee is refundable if residency is denied

Mail or hand deliver to:
 Stoneybrook Community Center
 11800 Stoneybrook Golf Drive
 Estero, FL 33928
 Office: (239) 948-1787

Vehicle gate decals & pool/fitness keys are \$10.00 each. Payment is collected when the decal or key is issued.

ACKNOWLEDGEMENT

I hereby agree for myself and on behalf of all persons who may use the residence which I own or seek to lease:

1. I represent that the following information is true and accurate. I understand any misrepresentation or falsification of information on these forms will result in the automatic rejection of this of this application.
2. I certify and hereby acknowledge that I have been furnished a copy of the Stoneybrook Association documents at www.StoneybrookWebsite.com: Rules and Regulations, Declaration of Covenants, Conditions & Restrictions, Bylaws and Architectural Review Procedure Manual.
3. I have read, understand and agree to abide by all of the restrictions contained in the Stoneybrook Association documents which are or may in the future be imposed by the Association.
4. I understand that any violation of the terms, provisions, rules, conditions, and covenants of the Stoneybrook Association documents provides cause for immediate action as therein provided or termination of the lease under appropriate circumstances.
5. Owners hereby delegate their rights of enjoyment of the Common Area to the Tenants for the lease term.
6. I acknowledge sub-leasing and/or unregistered occupancy of this residence is prohibited.
7. I understand that the Association will institute an investigation of my background and that a personal interview may be requested. Accordingly, I agree to attend a personal interview upon request and authorize the information contained in this application to be used in such investigation.
8. I am aware that the decision of the Association will be final and no reason will be given for any action taken by the Board. I agree to be governed by the determination of the Board of Directors.
9. I agree to be bound by the following lease addendum:

This is an Addendum to the Lease between Owner and Tenant for the Property stated herein, beginning on _____ (date of Lease) and all renewals thereof.

- a) In the event that an Owner is forty-five (45) days in default in the payment of assessments or other sums due and owing to Stoneybrook, A Golf Course Community of Fort Myers, 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 Property according to the priority established in Section 720.3085, Florida Statutes, until the Owner's account is current.
- b) It is understood by tenants/lessees that a quarterly lease review by Alliant Management and The Board of Directors of Stoneybrook a Golf Community will be performed over the terms of this lease. The review will consist of, but not be limited to:
 - Any noise violations resulting in complaints from other residents
 - Any damage to the rental unit or property within the Stoneybrook Community
 - Any guard gate reports of any violations
 - Any police arrests and convictions

In the event any complaints are recorded, Alliant Management and Stoneybrook reserve the right to take legal action, at the Owners expense and terminate the lease immediately.

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 Stoneybrook, A Golf Course Community of Fort Myers, Inc.

Homeowner(s):

| |
|--------|
| Sign: |
| Print: |

| |
|--------|
| Sign: |
| Print: |

Tenant(s):

| |
|--------|
| Sign: |
| Print: |

| |
|--------|
| Sign: |
| Print: |

LEASE INFORMATION

Property Address

Lease Dates _____ to _____

Homeowner or Real Estate Agent handling this transaction:

| | |
|---------|------------------------|
| Name | Company, if applicable |
| Address | City, State, Zip |
| Email | Phone |

APPLICANT INFORMATION

List all persons who are named on the lease and/or will occupy the residence. Attach an additional page if necessary. Please list the primary contact first. The relationship for each person is to the primary contact.

| | | | |
|-----------------|------------------------|--------------|------|
| Name | Age | Relationship | SELF |
| Current Address | City, State, Zip | | |
| Home Phone | Birth date if under 18 | | |
| Cell Phone | Email | | |

| | | |
|------------|------------------------|--------------|
| Name | Age | Relationship |
| Home Phone | Birth date if under 18 | |
| Cell Phone | Email | |

| | | |
|-------|------------------------|--------------|
| Name | Age | Relationship |
| Phone | Birth date if under 18 | |

| | | |
|-------|------------------------|--------------|
| Name | Age | Relationship |
| Phone | Birth date if under 18 | |

| | | |
|-------|------------------------|--------------|
| Name | Age | Relationship |
| Phone | Birth date if under 18 | |

| | | |
|-------|------------------------|--------------|
| Name | Age | Relationship |
| Phone | Birth date if under 18 | |

EMPLOYMENT INFORMATION

| | |
|----------------|---------------------------------|
| Applicant Name | Current/Last Prior Occupation |
| How Long | Phone Number, if we may contact |

| | |
|----------------|---------------------------------|
| Applicant Name | Current/Last Prior Occupation |
| How Long | Phone Number, if we may contact |

VEHICLE INFORMATION

To obtain a gate decal, your driver's license and registration for the vehicle will be required. Additional documents are required if the registration is not in your name and for rental cars.

| | | | | | |
|------|------|-------|-------|---------------|-------|
| Year | Make | Model | Color | License Plate | State |
| Year | Make | Model | Color | License Plate | State |
| Year | Make | Model | Color | License Plate | State |
| Year | Make | Model | Color | License Plate | State |

PET INFORMATION

The Board of Directors for the Stoneybrook A Golf Community requires applicants to inform the Board of the type and weight of all pets. Community restrictions Section 5 Article 26 state: No more than two (2) household pets may be kept, provided they are not kept, bred or maintained for any commercial purpose, and provided that they do not become a nuisance or annoyance to any neighbor by reason of barking or otherwise. No animals may be allowed around the Community unless they are leashed (including cats) as stated in Animal Control Ordinance 06-12.

| | | | |
|----------|------------|-------|--------|
| Pet Name | Type/Breed | Color | Weight |
| Pet Name | Type/Breed | Color | Weight |

Initial One:

_____ I/We agree to provide the registration and current vaccination records for all pets.

_____ I/We do not have any pets.

OFFICE USE ONLY BELOW THIS LINE

Notes:

| | |
|--------------|-------|
| Approved By: | Date: |
|--------------|-------|

DISCLOSURE CONSENT APPLICATION

Please Print Your Full Name

SSN

Please Print Any Other Names You Have Used

DOB

Street Address

City

State

Zip Code

Driver's License#

Exp. Date

State Issued

I hereby give consent for an investigative consumer report to be prepared on me, which may include information about me obtained from Law Enforcement Agencies, State Agencies, as well as Public Records information such as credit reports, social security information, criminal history information, motor vehicle records and workers' compensation records, such as are allowed by law and in accordance with the Americans With Disabilities Act.

Signature

Date

Witness

Date

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Signature

Date

Witness

Date

CHARACTER REFERENCE FORM

To be completed by someone outside of your immediate family: friend, neighbor, co-worker, etc.

Applicant Name

To whom it may concern:

The Applicant named above is applying to a Deed Restricted Community in Southwest Florida. The Board of Directors would appreciate it if you would furnish us with whatever information you consider pertinent in verifying the character and stability of the applicant.

Upon completion, please return this form to the APPLICANT. This completed Character Reference form must be sent with their application in order for the Board to consider their Purchase or Lease. Thank you for your assistance in this matter.

YOUR INFORMATION

Please print

| | |
|---------|------------------|
| Name | Today's Date |
| Address | City, State, Zip |
| Phone | Alternate Phone |

1 How do you know the applicant? _____

2 For how long have you known the applicant? _____

3 Would the applicant make a good neighbor in your opinion? YES NO

4 Please describe the applicant's character and stability as you know them:

5 I certify this information to be true and accurate. Signed: _____

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