

APPLICATION FOR SHORT TERM, SEASONAL LEASE

Name of Community: TULIP GARDENS CONDOMINIUM Date: _____
Unit Address: _____ Apt. #: _____
City: _____ State: _____ Zip: _____
OWNER'S NAME: _____ Phone: _____

I/we submit the following information to the Board of Directors regarding my/our lease of the unit listed above. **Picture identification on each lessee must accompany this application as proof that lessee(s) are 55 years of age or older.**

Lease Term is From _____ to _____

THE FOLLOWING INFORMATION MUST BE COMPLETED BY THE PROSPECTIVE LESSEE:

Lessee Name: _____ D.O.B.: _____

Lessee Name: _____ D.O.B.: _____

Present Address: _____

Phone Number(s): _____

<u>Vehicle Make & Model</u>	<u>Year</u>	<u>Lic. Tag #</u>	<u>State</u>
_____	_____	_____	_____

A TRANSFER FEE OF \$100.00 MUST ACCOMPANY THIS APPLICATION, PAYABLE TO TULIP GARDENS CONDOMINIUM - ALL MAINTENANCE FEES FOR THIS UNIT MUST BE CURRENT OR SHORT TERM LEASE WILL NOT BE APPROVED.

I/we understand that acceptance for lease in this Community is conditioned upon the approval of the Board of Directors. Accordingly, I/we hereby agree for myself and on behalf of all persons who may use the unit which I/we seek to lease that I/we will abide by all restrictions contained in the Declaration of Condominium and Rules and Regulations which may currently be in effect or which may in the future be imposed by the Board of Directors. I/we will read the Rules and Regulations upon arrival. **IT IS UNDERSTOOD THAT NO PETS ARE ALLOWED.**

I/we understand that sub-leasing or occupancy of this unit in my/our absence by others is not permitted without prior written approval of the Board of Directors.

I/we understand that payment of the \$100.00 transfer fee does not in any way constitute approval for this transaction.

Owner: _____ Date: _____
Lessee: _____ Date: _____
Lessee: _____ Date: _____

THIS APPLICATION MUST BE MAILED TO AMBASSADOR MANAGEMENT TWO (2) WEEKS PRIOR TO THE ARRIVAL OF LESSEE TO UNIT.



Active U.S. Service Members Only

Pursuant to (Fla.Stat. §83.683) of the Florida Residential Landlord and Tenant Act.

If you are a member of the U.S. Armed Forces "On active duty or state active duty", member of the Florida National Guard, or member of the U.S. Reserve Forces.

Please provide the following information as well as a copy of your Military ID upon submitting your application for Lease.

1. State what branch you are currently serving in

2. Sign and date _____ 20_____

By signing this form; you acknowledge that you are on Active duty in the U.S Armed Services and are submitting an application to Lease in the Association.