

Sunfish Bay Condominium Association, Inc.  
A Deed Restricted Community

## Application for Lease

Lease Minimum of 12 Months

Note: *Application must be submitted 21 days prior to occupancy for Board approval*

*Please include a copy of the lease for this unit*

***A background check is required of all applicants***

**\$150.00 APPLICATION FEE**

**PLEASE PRINT CLEARLY**

Property to be Leased: \_\_\_\_\_ Lease Date: From \_\_\_\_\_ To \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Owner's Email Address: \_\_\_\_\_

Owner's Home Tele #: \_\_\_\_\_ Cell/Work Tele: \_\_\_\_\_

**Personal Data of Lessee: Names:**

(1) \_\_\_\_\_ Phone Contact No. \_\_\_\_\_

(2) \_\_\_\_\_ Phone Contact No. \_\_\_\_\_

Present Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell/Work: \_\_\_\_\_

Employment: NAME AND ADDRESS: \_\_\_\_\_

**Other Adults To Live in Unit:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

**Children To Live in Unit:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

If you have previously resided at Sunfish Bay, please list address:

\_\_\_\_\_

**Pet Information:** (Maximum two pets per unit)

Type of Animal: \_\_\_\_\_ Breed: \_\_\_\_\_ Weight: \_\_\_\_\_  
Type of Animal: \_\_\_\_\_ Breed: \_\_\_\_\_ Weight: \_\_\_\_\_

**Vehicle Information:**

Tag # \_\_\_\_\_ Make/Model \_\_\_\_\_ Year: \_\_\_\_\_  
Tag # \_\_\_\_\_ Make/Model \_\_\_\_\_ Year: \_\_\_\_\_

*(No boats, trailers, campers, commercial vehicles, buses, motor homes, or mobile homes are permitted on property overnight.)*

**Lease Data:** There is a minimum written lease of twelve months. The lease is to be written for the entire unit and not just a portion thereof.

Realtor: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

A copy of the lease agreement is to be attached to this application.

**Documents and Agreement** (A background check is required of all applicants)

**Lessee:** I understand that Sunfish Bay is a deed-restricted community and I agree to abide by its documents and Rules and Regulations.

Signature: \_\_\_\_\_  
Signature: \_\_\_\_\_

I have received \_\_\_ have not \_\_\_ received a copy of the Rules and Regulations of the community.

Completed Applications for Board Approval should be Sent to:

Ronny Dunner, LCAM  
Ameri-Tech Property Management, Inc.  
24701 U.S. Highway 19 North, Suite 102  
Clearwater, FL 33763

Telephone: (727) 726-8000 x405 FAX: (727) 723-1101

Name and Address of Homeowner or Real Estate Agent to whom Approved Application is to be Mailed:

Homeowner/Agent: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Application Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

**Ronny Dunner LCAM, Acting as Agent for Sunfish Bay Condominium Association**