

**APPLICATION FOR APPROVAL OF  
SALE OR ANNUAL LEASE OF CONDOMINIUM UNIT**

**TO: The Board of Directors of Pavilion Club Condominium Association, Inc.  
806 Gulf Pavilion Dr., Naples, FL 34108 (239) 566-8010 Office/Fax**

- [ ] I hereby apply for approval to **purchase** unit \_\_\_\_\_, in building \_\_\_\_\_, at the Pavilion Club Condominiums, and for membership in the Condominium Association. **A complete copy of the signed purchase agreement is attached.**
- [ ] I hereby apply for approval to **lease** unit \_\_\_\_\_, in building \_\_\_\_\_, at the Pavilion Club Condominiums, for the period beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_. **A complete copy of the signed lease is attached. Minimum lease term is thirty (30) days no more than five (5) times in any calendar year.**

In order to facilitate consideration of this application, I represent that the following information is factual and correct, and agree that any falsification, misrepresentation or incomplete information in this application will justify its disapproval. I consent to your further inquiry concerning this application, particularly of the references given below and a criminal and financial investigation into my background.

**PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:**

1. Full name of Applicant: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Drivers License# \_\_\_\_\_
2. Full name of Spouse (if any): \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Driver License# \_\_\_\_\_
3. Home Address: \_\_\_\_\_  
Telephone: Home: ( ) \_\_\_\_\_ Business: ( ) \_\_\_\_\_
4. Social Security number of Applicant: \_\_\_\_\_  
Social Security number of Spouse: \_\_\_\_\_
5. Nature of Business  
or Profession. \_\_\_\_\_  
If retired, former  
business or profession. \_\_\_\_\_
6. Company or Firm name \_\_\_\_\_
7. Business address \_\_\_\_\_
8. The condominium documents of the Pavilion Club Condominium restrict units to use as single family residences only. Please state the name and relationship of all other persons other than the applicant who will be occupying the unit on a regular basis.

9. Name of current or most recent landlord: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

10. Two personal references (local if possible)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone( ) \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

11. Two credit references (local if possible)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Account Number: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Account Number: \_\_\_\_\_

12. Person to be notified in case of emergency:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_ Phone ( ) \_\_\_\_\_

13. Motor vehicle to be kept at the Condominium:  
Model/Make: \_\_\_\_\_ Year: \_\_\_\_\_  
License Plate Number: \_\_\_\_\_ State: \_\_\_\_\_

14. Mailing address for notices connected with this application:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_

15. *If this transaction is a sale, please circle the number that applies:*

- I am purchasing this unit with the intention to:
- (1) reside here on a full-time basis;
  - (2) reside here part-time
  - (3) lease the unit.

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

16. I am aware of, and agree to abide by the Declaration of Condominium of the Pavilion Club Condominium, the Articles of Incorporation and Bylaws of the Association, and any and all properly promulgated rules and regulations. I acknowledge receipt of a copy of the Association rules. NOTE: Pets are prohibited in leased units. Pickup trucks are prohibited.

*If this transaction is a sale,* the prospective purchaser will be advised by the Association office within a 10 day period from the date of receipt of application and all information and appearances requested, of whether this application has been approved.

*If this transaction is a lease*, the prospective lessee (tenant) will be advised by the Association office within 20 days period from the date of receipt of application and all information and appearances requested, of whether this application has been approved. If this transaction is a lease, this application must be signed by the lessee applicant and by the realtor or other person who acted as rental agent for the unit owner. I, the lessee (tenant), understand and agree that the Association, if it approves a 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 the Pavilion Club Condominium, the Association's Bylaws, and the rules and regulations of the Association. I, the lessee (tenant), also understand and agree that if the lease to the unit is approved and any special assessment or installment of a regular assessment for a unit remains unpaid for at least thirty (30) days after the due date and a Claim of Lien has been recorded against the unit, then upon written notice mailed to both the owner and the lessee of such delinquency, both the owner and I, the lessee (tenant), agree that all future lease payments due under the lease shall be paid by the lessee (tenant) directly to the Association until such time as the Association notifies both the owner and lessee (tenant) that all sums due the Association have been paid in full. Such lease payments shall be funds of the Association to be utilized for any Association purpose at the discretion of the Board and shall only be remitted to the owner if full payment of all amounts due the Association have been paid by the owner and a Satisfaction of Claim of Lien has been recorded.

DATED \_\_\_\_\_

\_\_\_\_\_  
Applicant (Prospective Purchaser or Tenant)

\_\_\_\_\_  
Applicant (Prospective Purchaser or Tenant)

A non-refundable check in the amount of \$100.00, payable to the Pavilion Club, must accompany this application for the purpose of defraying costs of checking references, background investigation, directory updating, and other expenses related to the processing of this application.

A separate application and fee is required for any unrelated individuals over the age of 18 who intend to occupy the unit. Additional application forms may be obtained by contacting the office at (239) 566-8010.

As the rental agent for the unit owner, the undersigned agrees to be responsible for immediate correction or prevention of any violations by the tenants of the restrictive covenants or rules applicable to the Condominium, including termination of the lease and removal of the tenant.

\_\_\_\_\_  
Realty Company (if applicable)

\_\_\_\_\_  
Signature of rental agent

\_\_\_\_\_  
Phone number of rental agent

\_\_\_\_\_  
Print name of rental agent

APPLICATION APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

DATE: \_\_\_\_\_ BY: \_\_\_\_\_

\_\_\_\_\_  
Officer or Director or Authorized Representative