APPLICATION FOR RESIDENTIAL DWELLING San Terra Development Condominium Association, Inc.

aka Castillo Del Sol Condominium Association, Inc 936 Pinellas Bayway S, Tierra Verde, FL 33715

- 1. In making this application, I represent to the Board of Directors that the purpose for lease of a unit at Castillo del Sol is residential and non-commercial and understand that no more than six (6) people may occupy a two-bedroom unit on a permanent basis.
- 2. I understand that there is a twelve (12) month minimum rental policy and agree not to engage in any short-term lease or rentals which violate this restriction. I will follow the application requirements in the Rules and Regulations.
- 3. I have received the Association Documents and Rules and Regulations, and I hereby agree for myself and on behalf of all persons who may use the unit which I seek to purchase, that I/we will abide by all the restrictions contained in the Condo Documents, and Rules and Regulations.
- 4. I will provide a copy of the executed lease within 30 days after approval.
- 5. I understand that I may have no more than two pets, one dog or two cats or one dog and one cat. Small birds such as canaries or parakeets are permitted. Large exotic noisy birds and reptiles of any type are prohibited. Dogs are limited to 70 pounds maximum. Pets must be leashed when outside. Also, I understand that I am responsible to ensure any visitors or guests follow the Association guidelines and Rules and Regulations concerning pets.
- 6. I understand that boats, jet skis and other watercraft, trailers or RVs are not allowed to be stored on Association property unless parked or stored in a garage. Commercial vehicles and vehicles with advertising signs are not permitted to be parked or stored on the property.
- 7. I agree to an interview with at least one member of the Board of Directors which is required prior to an approval letter being issued by the Association to the Title company.
- 8. I understand that the Board of Directors of Castillo del Sol Condominium Association may conduct a standard background check. Accordingly, I specifically authorize such investigation and agree that the information contained in the attached application may be used in such an investigation, and that the Board of Directors, Officers and Management of Castillo del Sol itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation. The Board of Directors, Officers and Management of Castillo del Sol warrant that the use of the information provided is solely for the purpose of accepting the tenant(s) in accordance with the bylaws of the Association. Further, Castillo del Sol will not retain your social security number once the background check is completed.

All applications must be completed, incomplete applications submitted will not be processed. If the applicant fails to adhere to submit the full application package, the application will be considered automatically cancelled. An application is incomplete if it does not include all required forms, fees, and documents, such as but not limited to, a lease.

Applicant Signature	Date
Applicant Signature	Date

APPLICATION FOR OCCUPANCY - CASTILLO DEL SOL | LEASE

Return to: MC Homes 1155 Pasadena Ave S, Ste H, South Pasadena FL 33707 | office@mchomesrealty.com | 727-432-2181

REQUIREMENTS: A non-refundable application fee of \$25.00 (payable to San Terra Development Condo Assoc, Inc.) A non-refundable background fee of \$65 for each applicant over 18 years old to MC Homes: https://castillo.hoamch.com Along with the application and fees, a copy of the ID for each applicant, a copy of the lease, as well as vaccination records and pictures of pet(s).

	Unit #	<u> </u>	Leasing date	//		
		nd Seasona our mailing address:				
Names of Adults (over age 18) who will occupy the unit: Providing your email address authorizes the Board of Directors and MC Homes to provide notice of relative Association business and to deliver information to you by electronic transmission.						
1. Name			Date of Birth _	/		
Phone #	-		Email address:			
2. Name			Date of Birth _	/	/	
Phone #	-		Email address:			
3. Name			Date of Birth _	/	/	
Phone #	-		Email address:			
4. Name			Date of Birth _	/	/	
Phone #			Email address:			
Names and ages of all children who will occupy the unit: Child's Name Year of Birth						
Child's Name)			Y	ear of Birth	
		If yes, please an ts over 70 pounds a	•		permitted - one dog or gulations)	two cats
Туре	Breed	Age_	Color	Weight	Full Grown? Yes _	No
Туре	Breed	Age_	Color	Weight	Full Grown? Yes _	No
		- -	IICLE INFORMATIO			
					ig State & Number:	
					ig State & Number:	
Emerg	ency Contact: N	ame		Phone #	#	
decision of th	ie Castillo del So	-	ociation will be final a	and agree to a	on and am/are aware that bide as according to the	
Applicant Sig	n	Date	Applicant Sig	n	Date	
Applicant Sig	n	Date	Applicant Sig	n	Date	
Applicant Sig	n	Date	Applicant Sig	n	Date	
		<i>F</i>	association to fill out			
Approved By	:				Date	

BUYER / TENANT INFORMATION FORM

THIS FORM MUST BE COMPLETED FOR ALL APPLICANTS OVER 18 YEARS OLD.

, We	prospective tenant(s) for the		
property located at <u>936 Pinellas Bayway S Tierra</u>			
Managed By: MC Homes Realty, Inc, Ow	ned By:		
criminal, and rental history as well as any other his application. I/ we understand that on my/ou	property owner/ manager to inquire into my/ our credit file, personal record, to obtain information for use in processing of ur credit file it will appear that MC Homes Realty has made an acy or any other claim that may arise against MC Homes		
PLEA	SE PRINT CLEARLY		
TENANT INFORMATION	SPOUSE / ROOMMATE		
[]SINGLE []MARRIED	[]SINGLE []MARRIED		
FULL NAME:	FULL NAME:		
SOCIAL SECURITY NUMBER:			
DATE OF BIRTH:			
DRIVER'S LICENSE NO:			
CURRENT ADDRESS:	CURRENT ADDRESS:		
HOW LONG LIVING IN THIS ADDRESS:	HOW LONG LIVING IN THIS ADDRESS:		
NAME OF LANDLORD:	NAME OF LANDLORD:		
LANDLORD PHONE NUMBER:	LANDLORD PHONE NUMBER:		
PREVIOUS ADDRESS:	PREVIOUS ADDRESS:		
HOW LONG LIVING IN THIS ADDRESS:	HOW LONG LIVING IN THIS ADDRESS:		
NAME OF LANDLORD:	NAME OF LANDLORD:		
LANDLORD PHONE NUMBER:	LANDLORD PHONE NUMBER:		
EMPLOYER:	EMPLOYER:		
OCCUPATION:	OCCUPATION:		
GROSS YEARLY INCOME:	GROSS YEARLY INCOME:		
LENGTH OF EMPLOYMENT: WORK PHONE NUMBER:			

IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT.

DATE:

SIGNATURE:

HAVE YOU EVER BEEN ARRESTED? [] YES [] NO

IF YES, PLEASE SEND A LETTER OF EXPLANATION.

HAVE YOU EVER BEEN CONVICTED? [] YES [] NO

HAVE YOU EVER BEEN ARRESTED? [] YES [] NO

IF YES, PLEASE SEND A LETTER OF EXPLANATION.

HAVE YOU EVER BEEN CONVICTED? [] YES [] NO

SIGNATURE:

DATE: