



CTCA LEASE APPLICATION

Unit Street Address _____

Building _____ Unit# _____ Parking Space# _____

Owned By _____

Term of Lease From: _____ To: _____

Lease term 30 day minimum; no more than 4 rentals per year:

- Please include a copy of the lease agreement.
- It is the responsibility of the owners and rental agents to collect the Collier County Tourist Development Tax of four (4%) percent and Florida State Sales Tax of six (6%) percent on all accommodations rented for six (6) months or less. Please call the Collier Tax Collector's office at 239-252-8829 and Florida Department of Revenue at 239-434-4858 if you have any questions or concerns.
- Renters are NOT permitted to have pets.
- Tenants cannot take occupancy until Association approval is granted.

I/We represent that the following information is complete and true, and agree that any misrepresentation in this application will justify automatic rejection. I/We consent to additional inquiry concerning this application and if requested will agree to an appearance before the Board of Directors for further questioning.

Applicant's Name(s): _____

Current Address: _____

City _____ State _____ Zip _____

Cell Phone _____ Email _____

Driver's License # _____ - _____

U.S. Citizen? _____ Business or Profession (even if retired) _____

Make of car(s) _____ Year _____ Plate# _____



Please state the name, relationship, and age of all other persons who will be occupying the unit regularly:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____

Character References:

Name _____ Phone # _____

Name _____ Phone # _____

Person to be notified in case of an emergency:

Name: _____ Phone # _____

I/We have read the Declaration of Condominium Documents, Charter, By-Laws, Rules & Regulations of the Condominium Association and agree to comply there with if this application for approval to LEASE is approved.

Applicant Signature _____ Date _____

Applicant Signature _____ Date _____

Firm / Owner Handling Lease _____

Owner or Agent Email _____ Phone _____

APPROVED BY BOARD MEMBER

DATE

LEASE APPLICATION

1. A non-refundable \$100.00 application processing fee, made payable to Aruba, Bequia or Caribe at Cove Towers Condominium, Inc. must accompany your application.
2. Any approval is void in the event of false statements in the Lease application.
3. Lease application needs to be in our office fifteen (15) days before the start of the lease.
4. A fully executed copy of the proposed lease agreement must be enclosed with the application.
5. No subleasing or assignments of lease rights are allowed.
6. It is the responsibility of the owners and rental agents to collect the Collier County Tourist Development Tax of four (4%) percent and Florida State Sales Tax of six (6%) percent on all accommodations rented for six (6) months or less. Please call the Collier Tax Collector's office at 239-252-8829 and Florida Department of Revenue at 239-434-4858 if you have any questions or concerns.
7. Rentals: 30 day minimum, maximum of 4 per year. Yearly leases are acceptable.
8. Pets: Per the Association documents, tenants and guests are **NOT** permitted to have pets.
9. Vehicles: Check your documents, as there are assigned parking spaces. Upon your arrival, contact the On-Site Property Manager at (239) 566-1976 or visit his office located in the Caribe building.
10. Please sign below indicating that you have read the Application as stated above and agree to abide by the Rules and Regulations as set forth including the Cove Towers Association Documents.

Tenant Signature: _____ Date: _____

Tenant Signature: _____ Date: _____

Firm/Owner Handling Lease: _____ Date: _____

MAIL YOUR APPLICATION TO: **COVE TOWERS CONDOMINIUM ASSOCIATION, INC.**
c/o KW Property Management & Consulting, LLC
3365 Woods Edge Circle - Suite 102
Bonita Springs, FL 34134