

# SORRENTO BAYSIDE HOMEOWNERS' ASSOCIATION

APPLICATION (check one)  RENTAL/LEASE  SALE/PURCHASE

This application must be completed in its entirety and submitted before any contract to purchase is entered into. It is the applicant's responsibility to see that the real estate agent complies with these procedures. All applications MUST include a \$100 application fee per individual (or married couple), payable to Sorrento Bayside HOA, and a photocopy of Driver's License for all applicants. Please allow fourteen (14) days for approval.

Unit Address & Unit # \_\_\_\_\_ Term of Lease / Closing date \_\_\_\_\_  
Owner Name: \_\_\_\_\_ Co-Owner: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name (Print) \_\_\_\_\_ Name 2 (Print): \_\_\_\_\_

Phone number: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone number: \_\_\_\_\_ DOB \_\_\_\_\_

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

Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Present Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Previous Address \_\_\_\_\_ City/State: \_\_\_\_\_ Zip \_\_\_\_\_

Name of Landlord/Mortgage: \_\_\_\_\_ Bank (local) \_\_\_\_\_

Employer: \_\_\_\_\_ Phone # \_\_\_\_\_ Employer: \_\_\_\_\_ Phone # \_\_\_\_\_

References: Name, Address & Phone # (other than family or Real Estate Agent) Preferably Local:

Real Estate Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Pets: (cat, dog, bird) Type: \_\_\_\_\_ Number: \_\_\_\_\_

Vehicle Information:

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

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

Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Names and Ages of additional occupants: \_\_\_\_\_

I have received and read a copy of all Association's Documents, Rules & Regulations. I understand my responsibilities as a renter/occupant. I agree to abide by the provisions of said documents.

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

## AUTHORIZATION FOR VERIFICATION OF INFORMATION FOR CREDIT REPORT, PUBLIC RECORD, RENTAL OR LEASE HISTORY AND EMPLOYMENT VERIFICATION

I agree to hold harmless Progressive Community Management, Inc., and all providers of information on the prospective owner/ tenant's stated above. In the event that the information provided by me (us) is found to be misleading or false, my acceptance for this lease whether determination is made before or after my date of occupancy, maybe affected. I do hereby authorize with my (our) signature(s) the release of public records, credit report, rental or lease information and employment verification, whether by fax, verbal, photocopy or original signature, to Progressive Community Management, Inc., and all its members now and in the future for exclusive use of the Association.

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

Action by Association: Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ Conditions: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Return Application and Fee to:

**Progressive Community Management, Inc.**  
3701 South Osprey Avenue  
Sarasota, FL 34239