



Princeton Place 2
at Wiggins Bay Foundation

320 Horse Creek Drive
Naples, Florida 34110
Princetonplace2.com

Application for Approval to Lease Condominium Unit

To: Community Management Associates, Inc.
3806 Exchange Ave
Naples, FL 34110

I (We) hereby apply for approval to lease unit # _____ in Princeton Place at Wiggins Bay Condominium Two for the period beginning _____ and ending _____ (30 day minimum).

PLEASE SUBMIT THE FOLLOWING ALONG WITH THIS APPLICATION NO LESS THAN THIRTY (30) DAYS PRIOR TO THE RENTAL:

- A completed copy of the lease.
- A check in the amount of \$100, or \$50 for returning renters, made payable to Princeton Place at Wiggins Bay Condominium Two (for the purpose of defraying costs of checking references and other expenses related to the processing of this application).
- A completed Island Eyes background form(s) and check in the amount of \$50 per person over the age eighteen, made payable to Princeton Place at Wiggins Bay Condominium Two (new renters ONLY).
- Two completed Character Reference Forms (new renters ONLY).
- Signature page ONLY from the Renter Rules & Regulations Form. (Please have a copy available in the unit for your renter.)

To facilitate consideration of this application, I (we) represent the following information is factual and correct and agree that any falsification or misrepresentation in this application will justify its automatic rejection. I (We) consent to your further inquiry concerning this application, particularly of the references given below.

The unit owner or rental agent will be advised by the Management Company within a 20-day period from the date the application is received by the Association whether this application has been approved.

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION

- 1. Full Name of Applicant _____
- 2. Full Name of Spouse _____
- 3. Home Address _____
- 4. City/State/Zip _____
- 5. Cell Phone # _____ Cell Phone # _____
- 6. Business or Profession _____
- 7. Company Name _____
- 8. Make/Model of Car _____ License Plate# _____

Contact info for unit owner or leasing agent.

Names _____
 Address _____
 City/State/Zip _____
 Telephone _____
 Email _____

I am (We are) aware of and agree to abide by the Amended and Restated Declaration and the Amended and restated Bylaws of Princeton Place at Wiggins Bay Condominium Two and all rules and regulations properly promulgated thereunder.

Section 13.3 of the Amended and Restated Declaration provides an obligation of unit owners that all units are to be used as single-family residents only with a maximum occupancy of two (2) persons per bedroom.

I am (We are) aware of and agree that the Association and/or Management Company, when the unit is 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 in the Princeton Place Condominium Two Documents.

Date _____
 _____ Applicant Signature Applicant Signature

 Owner/Agent Signature

APPLICATION APPROVED _____ DISAPPROVED _____

Date _____

BY _____
 Office, Director, or Agent authority