Palazzo at Naples HOA Annual Lease Renewal

The approval process requires twenty (20) days for completion from the date of complete submission of the application along with the new lease. Current owner of record: Property Address: **LEASE DATES:** The term of the lease is from ______, 20_____ to _____, 20____ THIS FORM MUST BE SUBMITTED AND APPROVED BY THE ASSOCIATION MUST BE SUBMITTED AT LEAST TWENTY (20) DAYS **PRIOR TO OCCUPANCY.** Acceptance for Lease of the above address is conditional upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of information on these forms will result in the automatic rejection of this application. Domestic Pets are permitted. (No Aggressive breeds will be allowed) Persons who will occupy the above Residence (living unit) are as follows: 1. Name Relationship Age 2. Name _____ Relationship ____ Age___ 3. Name ______ Age____ Applicants Phone # Applicants Email _____ LIVING UNITS MAY NOT PARK MORE THAN 2 VEHICLES IN THE DRIVE WAY AT ONE GIVEN TIME THE ASSOCAITION ASKS THAT YOU PLEASE USE YOUR GARAGE AS TO NOT BLOCK THE ROAD OR SIDE WALK Auto #1: Make_____ Color____ Yr.___ Lic#___ St____ #2: Make Color Yr. Lic# St Auto Your signature will acknowledge your agreement to comply with the Rules and Regulations as stated in the Declaration of Covenants, Conditions and Restrictions under "Use Restrictions". → SIGNATURE OF APPLICANT(S) DATE____ → SIGNATURE OF OWNER OR AGENT: Address of Owner or Agent: _____ City ______ State _____ Zip _____ Phone _____ Email: _____ Please fill out the above completely, so we can update our records if need be. This application has been designed for the purpose of protecting you and the current property owners. It is the desire of the present owners of the Association to welcome you to an environment in which pride in ownership and adherence to all Rules and Regulations will ensure a private and ideal community life. **ACTION OF BOARD OF DIRECTORS** APPROVED____DISAPPROVED___DATE OF DECISION _____

Association Director Manager for the Association