

Before submitting your Lease for processing you **MUST** have the following attached:

- Completed application- **EVERYTHING** must be filled out in order to process.
- Application Fees- check for \$150.00 made payable to **COMPASS POINT SOUTH AT WINDSTAR**
- *(Applications will not be processed without fees)*
- Lease contract (signed copy)
- Background form
- You will need to complete an application for Windstar Master-Mitch Johnson
239-775-3400 ext. 202 mitch@windstarmaster.com
- Other (all required documents are listed on page one of lease application)

Please do not submit partial packages. Applications are not considered received until **ALL** documentation is submitted. Incomplete applications will be reviewed and sent back.

Applications **must be submitted 20 days prior to Lease Occupancy.** Any application(s) submitted less than 20 days prior to the lease start date may have their start date delayed.

Please submit the Complete Application to:
Resort Management: 2685 Horseshoe Dr. S. #215 Naples, FL 34104
lwinebrenner@resortgroupinc.com

If you have any questions, please feel free to contact us at 239-649-5526. You may drop off your application at Resort Management office Monday-Friday 9am to 4pm.

Incomplete applications will not be processed.

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<hr/> Applicant's Signature	<hr/> Co-Applicant's Signature	<hr/> Date	
<hr/> Owner's Signature	<hr/> Phone #	<hr/> Email	<hr/> Date
<hr/> Realtor's Signature	<hr/> Phone #	<hr/> Email	<hr/> Date

This form needs to be signed and submitted with completed application.

COMPASS POINT SOUTH AT WINDSTAR CONDOMINIUM ASSOCIATION, INC.

Lease Application

Must be submitted 20 days prior to lease occupancy

Return to: **Compass Point South at Windstar**

C/O Resort Management

2685 Horseshoe Dr. S #215, Naples, FL 34104

PH: 239-649-5526

Email: Lwinebrenner@resortgroupinc.com

Date: _____

Name of Current Owner: _____ Phone#: _____

[] I (we) hereby apply for approval to lease (unit address & unit #) _____

Starting _____ Ending _____

Lease Amount: _____

Rental/Leasing Agent/Owner _____ Phone: _____

Address: _____

NOTICE: Lease term minimum of thirty (30) days or one month, maximum of three (3) times per calendar year. In accordance with the governing documents of the Association, this application must be submitted along with required enclosures and application fees, twenty (20) days prior to occupancy to allow for processing time. Tenants may not move in until the Association has tendered official approval of their lease, and further, that moving in prematurely constitutes grounds for disapproval.

Place a dates of the lease starting and ending on the Lease Application. It would be appreciated

Please submit the following: (Incomplete Applications will be returned)

- A signed copy of the lease contract**
- A non-refundable check for \$150.00 payable to Compass Point South at Windstar**
- Number of applicants must match lease contract**
- A background form**
- A completely filled out application form. (Partially completed forms will not be considered)**

Separate applications must be completed for co-applicant (excludes married couples).

I (we) represent that the following information is complete and true. I (we) agree that any misrepresentation in this application will justify automatic rejection. I (we) consent to additional inquiry concerning this application, including a background check and credit check.

TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION

Full Name of Applicant: _____

Full Name of Spouse: _____

Current Home address:

Street number/name

City

State, Zip code

Phone #: _____

Email: _____

Current employer: _____ Position Held: _____

Employer's Address: _____ Tel. Number _____

Length of time in Position: _____ Supervisor's name _____ Monthly Income \$ _____

Citizen of U.S.? _____ **if no, submit document copy of residency authorization or passport photo page.**

Are you an active service member as defined by Florida Statute 250.01(21)? Yes _____ No _____

Make of Car: _____ Year: _____ License No. _____ State: _____

Second car: _____ Year: _____ License No. _____ State: _____

Use of this home is for single residence only. Two occupants per bedroom.

Please list the names, relationship and age of all persons who will occupy your home in addition to the applicants above.

NAMES	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____

Have you ever been convicted of a felony? Yes _____ or No _____

If yes, please include details _____

In case of emergency notify _____ Tel# _____ Relationship _____

Address _____ City _____ State & Zip _____

Any litigation such as evictions, suits, judgements, bankruptcies, foreclosures, etc? Yes _____ No _____

If yes, give details and dates _____

(Please use the back of this page if more space is needed)

I have received, read and agree to abide by the Rules and Regulations of Compass Point South at Windstar Condominium Association, Inc.

INITIALS

INITIALS

I (we) further agree that in the absence of the owners, the Association is granted full power to take whatever action necessary, **including eviction**, to prevent or stop violations by lessees and their guests.

The prospective tenant(s) understands that the Association or its manager may use the above application to perform a background, prior landlord, credit and police records check on the applicant(s) listed above. This information will be kept confidential and may be used to approve or disapprove the applicant(s).

Occupancy prior to Board of Directors approval is prohibited.

The tenant(s) will be advised by the Association's Management whether this application has been approved.

1. No Pets are allowed in leased units. _____ (please initial)
2. NO OVERNIGHT PARKING OF TRUCKS, BOAT TRAILERS OR MOTOR HOMES IS PERMITTED.
3. No lease unit shall be subleased or loaned to another party.
4. I/we are aware of and agree to abide by the Condominium Documents of Compass Point South at Windstar, and any and all Association rules and regulations in effect during the term of my (our) occupancy. I acknowledge receipt of a copy of the Association's rules.

I (we) have read, understood and agree to all statements above.

Applicant signature: _____ **Printed Name:** _____ **Date** _____

Applicant signature: _____ **Printed Name:** _____ **Date** _____

Acceptance on behalf of Compass Point South at Windstar

Approved: _____

Disapproved: _____

Signature of Authorized Representative

Date: _____

For the Board of Directors

BACKGROUND/CREDIT CHECK APPLICATION

PROPERTY INFORMATION			
Address		City	State
Move-In Date	Move-out Date (if applicable)		
PRIMARY APPLICANT			
Full Name		Date of Birth	Social Security Number
Present Address		Present City	State
Primary Phone Number	Drivers License Number	Primary Email Address	
SECONDARY APPLICANT (IF APPLICABLE)			
Full Name		Date of Birth	Social Security Number
Present Address		Present City	State
Primary Phone Number	Drivers License Number	Primary Email Address	

I/we authorize Resort Management and Rental History Reports to do a complete investigation of all information provided with my application for residency. I have personally filled in and/or reviewed all information within the application. A complete investigation may include any or all of the following: Credit Report, Criminal Record, Rental History References (including MPHA), Employment Verification, Eviction Records and Personal Interviews with references. This authorization is for this transaction only and continues for (1) year unless limited by state law, in which case the authorization continues in effect for the maximum period, not to exceed (1) year, allowed by law. I acknowledge that Rental History Reports provides reports by written, electronic or verbal instructions to property managers of my choice and does not participate in the approval or denial process, and does not guarantee an approval. My submitting this application below acknowledges and agrees with all terms above and authorizes companies to release rental, eviction, credit and criminal record information. Any controversy or claim arising out of or relating to this agreement, or breach thereof, shall be settled by arbitration administered by the American Arbitration Association in accordance with its Commercial Arbitration Rules, and judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof.

Primary Applicant Signature

Date

Secondary Applicant Signature

Date