**GULF SHORES CONDOMINIUM ASSOCIATION, INC.**

Managed by KEYS-CALDWELL, INC. 1162 Indian Hills Blvd. Venice, FL 34293

Telephone: (941)408-8293

**RENTAL/LEASE APPLICATION**

Each application must be completed in its entirety, signed by the Owner(s) and the Applicant(s). A $150.00 non-refundable fee, payable to Gulf Shores Condominium must accompany each application submitted for approval. Application must be submitted in enough time for approval by the Gulf Shores Board of Directors. No application will be approved if the Owner is in arrears with regard to fees owed to the Association. Submit the Application and Fee to Keys-Caldwell, Inc., 1162 Indian Hills Blvd., Venice, FL 34293.

OWNER INFORMATION: Unit # \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lease Term: From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Minimum 3 Months)

Owner(s) Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner(s) Address (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone/Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone/Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Realtor Name (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

RENTERS INFORMATION:

Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone/Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone/Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Renter's Vehicle Information: Renter may park only 1 (one) vehicle in the Association parking lot and must use the owners designated spot. **Violators may be towed**.

Make: \_\_\_\_\_\_\_\_\_\_\_\_ Model: \_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_State/License #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Names of additional full-time occupants (give ages if under 18)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone: (941)408-8293 Fax: (941)408-8664 Email: *office@keys-caldwell.com*

**REQUIRED SIGNATURES**

By my signature, I/We acknowledge that:

1. I/We have reviewed the House Rules, and agree to abide by them.
2. I/We will ensure that all occupants and guests also abide by them.
3. I/We understand that no pets are allowed in the building.
4. I/We acknowledge that the unit is to be occupied by no more that 4 (four) persons.
5. I/We understand the Board of Directors, once it consents to this rental/lease, is authorized to take such action as may be necessary to see that I/we and/or my/our guests comply with the House Rules, and if necessary, to evict said occupants for non-compliance.

Applicant(s) Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant(s) Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* \* \* \* \*

By my/our signature as the Unit Owner(s), I/We agree to:

1. Indemnify and hold harmless the Association from any and all damages, including attorney's fees and court costs, caused by tenants and guests to the premises or arising responsibility pursuant by the Condominium governing documents or Florida law.
2. The approval of the application by the Board of Directors shall not be considered a waiver of any right the Association may have to enforce the rules, regulations and covenants contained in the Condominium governing documents or Florida law.
3. I/We understand the Board of Directors, once it consents to this rental/lease, is hereby to act as my agent to take such action as may be necessary to see that the tenants and/or their guests comply with the Gulf Shores Declaration of Condominium and House Rules, and if necessary, to evict said tenants for non-compliance.

Owner's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* \* \* \* \*

Gulf Shores Condominium Association: Board of Directors Review

Approved: \_\_\_\_\_\_\_\_\_\_ Disapproved: \_\_\_\_\_\_\_\_\_\_\_ Meeting Date: \_\_\_\_\_\_\_\_\_\_\_\_

Reason for Disapproval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Housing Director Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_