

## —— Community Association ————

## Lease Application

Please return completed application at least 45 days prior to arrival to:

Eagle Creek Property Management Office• 746 Eagle Creek Drive Unit 103 Naples, Florida
34113• Phone: 239-417-6101• Email: <a href="mailto:pmassistant@eaglecreekcc.org">pmassistant@eaglecreekcc.org</a>

Incomplete applications will not be processed and, therefore not be approved

## Attach the Following:

Copy of Lease Agreement • Copy of Drivers's License for each applicant

Property Address in Eagle Creek:		Electise for each applicant	
Neighborhood Association Name:			
Owner Name:			
	Phone Number:		
Email:			
Lease Start Date:	Lease End Date:		
Applicant #1:	Phone Number:		
Email:			
	Date of Birth:		
Driver's License #:		State:	
Current Address:			
		Zip Code:	
Applicant #2:	Phone Number:		
Email:			
	Date of Birth:		
Driver's License #:	State:		
Current Address:			
City:	State:	Zip Code:	
In case of emergency, notify	Phone Number:		

## Lease Application

Eagle Creek community Association	documents provide that all units	are for single fam	ily residence only.
Please state the name, relationship ar	nd age of all other people who wi	ll be occupying th	e unit regularly.
Name	Relationship	· · · · · · · · · · · · · · · · · · ·	Age
Name	Relationship		Age
Name	Relationship		Age
Name	Relationship		Age
VEHICLES: (No commercial or ov	ersized vehicles can be parked of	outside of the gara	age)
Make/Model:	Yr	Tag#	St
Make/Model:	Yr	Tag#	St
I am aware of and fully agree to	abide by the Community A	association Docu	ments and Rules &
Regulations. I acknowledge receipt	t of a copy of the Association re	ules	(initial here). I
understand and agree the Associati	ion, in the event it provides a le	ase, is authorized	to act as the owner's
agent, with full power and authority	to take whatever action may be i	required, including	g eviction, to prevent
violations by Lessees and their gues	sts, in accordance with the Docu	uments and the Ru	ules and Regulations
of the Association. I/We specific	cally authorize the Board of	Directors and A	Association Property
Management to institute an investig	gation of my background and a	gree that the info	rmation contained in
this application may be used in si	uch investigation, and that the	Board of Directo	ors and Eagle Creek
Community Association, INC. itse	elf shall be held harmless fro	m any action or	claim by us/me in
connection herein or any investiga		·	·
☐ I understand that a renter's pet(	s) are not allowed to be kept a	t any time in a lea	sed condominium unit
Applicant's Signature		Da	te
Applicant's Signature			
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • •	
	Applicant ApprovedAp	oplicant Denied	
Property Manager			Date
Property Manager			Datc