

**BERMUDA GREENS CONDOMINIUM ASSOCIATION, INC.**  
**c/o MAY Management Services**  
 6017 Pine Ridge Rd #262  
 Naples, FL 34119  
 239-262-1396

**LEASE APPLICATION**

Must be submitted 30 days prior to lease occupancy.

Return by Mail to Pine Ridge Road address above or  
 Deliver in Person to 11100 Bonita Beach Rd. #101 Bonita Springs, FL 34135

Annual Lease \_\_\_\_\_ Seasonal Lease \_\_\_\_\_

Date: \_\_\_\_\_

Name(s) of Current Owner of Record: \_\_\_\_\_

Best Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

[ ] I (we) hereby apply for approval to lease property address \_\_\_\_\_ Unit # \_\_\_\_\_

Term of Lease Beginning \_\_\_\_\_ Ending \_\_\_\_\_

Rental or Leasing Agent (if applicable) \_\_\_\_\_ Phone # \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE: Lease term minimum of (90) ninety days and maximum (12) months**

In accordance with the governing documents of the Association, **this application must be submitted with all the required enclosures and fees thirty (30) days prior to occupancy to allow for processing time. Tenants may not move in until the Association has tendered official approval** of the lease, and further, that moving in prematurely constitutes grounds for disapproval.

The following items **MUST** be included at the time the application is submitted to MAY Management. An incomplete Lease-Rental package will be returned to the owner or agent.

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

**ALL FEES ARE NON-REFUNDABLE**

1. **Completely** filled out application form. (Partially completed forms will **not be considered**)
  2. A signed copy of the lease-rental contract agreement by owner and all applicants
  3. Number of applicants must match lease contract and signed
  4. Completed Imperial Gate Form
  5. Legible Copy(s) of Driver's License
  6. \$50.00 Application Fee payable to BERMUDA GREENS
  7. \$50.00 Processing Fee payable to MAY MANAGEMENT
  8. \$50.00 Background Check Fee (U. S. Citizens) **per applicant 18 and over** payable to MAY MANAGEMENT
  9. \$100.00 Background Check Fee (Canada) **per applicant 18 and over** payable to MAY MANAGEMENT
- PLEASE CALL THE OFFICE FOR PRICING ON INTERNATIONAL BACKGROUND CHECKS**



**TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION**

**Full Name of Applicant:** \_\_\_\_\_

**Full Name of Applicant:** \_\_\_\_\_

**Current Home Address:** \_\_\_\_\_  
Address State Zip Code

Phone #1: \_\_\_\_\_ Phone #2 \_\_\_\_\_ Email: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag # \_\_\_\_\_ State: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag # \_\_\_\_\_ State: \_\_\_\_\_

**I/We understand that pickup trucks are not allowed. Other vehicle type restrictions are in the Bermuda Greens Rules and Regulations document. See pages 5 and 6 for details.**

**Initial** \_\_\_\_\_ **Initial** \_\_\_\_\_

The use of this home is for single family residence only. (2) Two occupants per bedroom.  
Please list the names, relationships and age of all persons who will occupy your home in addition to the applicants above.

NAME	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____

Do any of the adult occupants have a history of eviction suits, judgments, bankruptcies, foreclosure, assault, domestic violence, disruptive behavior, complaints, etc.?

**All adult occupants must answer and initial.**

Yes \_\_\_\_\_ No \_\_\_\_\_ : Yes \_\_\_\_\_ No \_\_\_\_\_ : Yes \_\_\_\_\_ No \_\_\_\_\_ : Yes \_\_\_\_\_ No \_\_\_\_\_ :

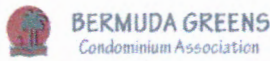
If yes, give details and dates \_\_\_\_\_  
\_\_\_\_\_

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 \_\_\_\_\_



**NOTE: WE UNDERSTAND THE FOLLOWING RULES AND REGULATIONS:**

**TENANTS AND GUESTS ARE NOT PERMITTED TO HAVE PETS IN ANY UNIT OR ON THE PROPERTY.**

\_\_\_\_\_ Initial(s) \_\_\_\_\_ Initial(s)

**BERMUDA GREENS IS A NON-SMOKING COMMUNITY**

\_\_\_\_\_ Initial(s) \_\_\_\_\_ Initial(s)

**TRUCKS OVER 40 FEET IN LENGTH AND PODS OF ANY SIZE ARE NOT PERMITTED ON BERMUDA GREENS PROPERTY INCLUDING DRIVEWAYS**

\_\_\_\_\_ Initial(s) \_\_\_\_\_ Initial(s)

**PODS ARE TO BE USED FOR THE MOVE IN OR OUT ONLY. I/WE HAVE READ THE GUIDELINES THAT REFERENCES PODS IN THE BERMUDA GREENS RULES AND REGULATION DOCUMENT**

\_\_\_\_\_ Initial(s) \_\_\_\_\_ Initial(s)

I (we) declare the foregoing information is true and correct. I (we) agree that any misrepresentation in this application will justify automatic rejection. I (we) consent to additional inquiry concerning this application, including the background check. \_\_\_\_\_

\_\_\_\_\_ Initial(s)

I/We understand the application fees are non-refundable. I/We am/are aware of and agree to abide by the Declaration of Condominium, Articles of Incorporation, By-Laws, and Rules and Regulations of the Association and acknowledge that the Association may terminate a lease upon default by the Tenant in observing any of the provisions in the documents. I/We acknowledge receipt of a copy of the Rules and Regulations. I/We understand the necessary confidential information will remain confidential by the Association's Officers and/or the Association Designee. \_\_\_\_\_ Initial(s)

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

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). \_\_\_\_\_ Initial(s)

**We acknowledge that unit occupancy prior to the Board of Directors' approval is prohibited and may constitute grounds for disapproval.**

\_\_\_\_\_ Initial(s)

The owner or agent will be advised by the Association's Management whether this application has been approved.

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

**Applicant signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Applicant signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Acceptance on behalf Bermuda Greens Condominium Association, Inc.**

New Lease App  
Rev 11/2023

Approved: \_\_\_\_\_

Disapproved: \_\_\_\_\_

\_\_\_\_\_  
Signature of Board Director or  
Authorized Representative for the Board of Directors

\_\_\_\_\_  
Date