

Hammock Cove Association, Inc.



459 NW Prima Vista Blvd. | Port St. Lucie, FL 34983
T: 772-219-4474 | F: 772-219-4746

TENANT RENEWAL APPLICATION

Please return completed package to ***Signature Property Management*** for processing.

A complete package includes:

- An application
- A fully executed Lease Application
- A non-refundable processing fee of \$50.00 payable to *Signature Property Management*.
- A **Criminal Background** is required. A non-refundable fee of \$50.00 **per adult** payable to *Signature Property Management* – Canadian background check is \$95.00 **per adult**, payable to *Signature Property Management*.

You will be contacted for an interview if requested by the committee

If application is submitted incomplete, it will be held **uninvestigated** until the rest of the required information is received.

Hammock Cove Association, Inc.



Signature
Property Management

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TENANT RENEWAL APPLICATION

{APPLICATION REQUIRES BOARD APPROVAL, IF ADDITIONAL SPACE IS NEEDED PLEASE USE OTHER SIDE}
ATTACH COPY OF LEASE AGREEMENT

Date: _____ Property Address: _____

Owners Name: _____ Phone #: _____

Tenant Name: _____ Phone #: _____

of Occupants: _____ # of Pets/ Breed: _____

Applicant's employer's name: _____ Phone #: _____

Emergency Contact: _____ Phone #: _____

Term of Lease from: _____ to _____ How long have you been a tenant at this _____

Please Circle YES or NO to the following questions.

- | | | |
|-----|----|---|
| Yes | No | Do you intend to occupy the property? |
| Yes | No | Have you received a copy of the Covenants and Rules & Regulations for Hammock Cove Association? |
| Yes | No | Do you agree to live by the governing documents and other rules and regulations that govern the area? |
| Yes | No | Are there any additional occupants that you have not disclosed to us? |
| Yes | No | Have you had any violation notices during your lease period? |

If YES was answered to any of the above, please provide explanation: _____

I/We fully authorize investigation of all answers and references given. If the Lessor fails to provide a set of documents to Lessee a copy will be made available by the Association Management Company at a cost of \$100.00 per document copy. These documents may be obtained on the Signature Property Management .Website (www.signaturepropertymgmt.com). Owner/Lessee agree to the terms of the attached contract/lease are within the requirements of Hammock Cove Association, Inc. Rules & Regulations pertaining thereto.

PLEASE NOTE: Leases must be a minimum of six (6) months. A copy of the lease must be attached to this application. Renters are not permitted to sub-lease at any time.

Lessee: _____	Date: _____
Over	Background Check Completed On: _____ Background Check: Approved [] Disapproved []

For Office Use Only A/R

Current: YES NO Violation History: YES NO Interview Requested: YES NO Interview Completed: ___ / ___ / ___

Application was Reviewed & Approved By: _____

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VEHICLE REGISTRATION FORM

Property Address: _____

Lessee: _____

Vehicle #1

Vehicle #2

Make: _____

Make: _____

Model: _____

Model: _____

Year: _____

Year: _____

Color: _____

Color: _____

Vin#: _____

Vin# _____

Tag#: _____

Tag# _____

State: _____

State: _____

Vehicles are registered to: _____

All information on this form must be completed.

Any changes in use or appearance of the above described vehicle(s) must be submitted to the Board of Directors with a new application.

It is clearly understood that cars must be parked in the driveway and/or garage. Parking in the street is not permitted.

Lessee: _____ Date: _____

Lessee: _____ Date: _____

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GENERAL AUTHORIZATION TENANT-RESIDENCY FORM

****Please present a separate page for each applicant****

Lessee Name: _____

Maiden name if applicable: _____

Date of birth: _____ Social Security #: _____

Present Address (street, city, state, zip): _____

Previous Address (street, city, state, zip): _____

I hereby authorize the Hammock Cove Association, to obtain and verify a social security number search, a criminal report history, and a credit check.

I agree to indemnify and hold harmless the Hammock Cove Association, their employees, officer and directors, affiliates, subcontractors, and agents from any loss, expense, or damage which may result directly or indirectly from information or reports furnished.

Lessee: _____ Date: _____