



OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.

1111 Forrest Nelson Blvd., Port Charlotte, Fl 33952

Tel: 941-624-3451 Email: oakhollowstaff@comcast.net Fax: 941-624-2552

Remember to Bring for Rental Renewal Applications

- Application to Qualify for Lease – three (3) page form
- Photo documentation: Driver(s) License/ Military ID Card(s)/ State ID Card(s)
- Updated Lease Agreement
- All waivers previously signed and on file do not need to be resubmitted.
 - Signed Acknowledgement of Rules & Regulations
 - Signed Fitness Waiver
 - Signed Rental Agreement/Lease
- If you currently have a fob, we will update the expiration date upon your renewal approval – you do not need to purchase a new fob.
 - For each FOB you wish to purchase bring \$10.00 (cash, check or money order made payable to Oak Hollow Property Owners' Association, Inc.)

- Email form if you wish to be included on the email distribution list

Application for Renewal

In order to process the renewal application, the following **must** be submitted:

- A completed application for renewal
- A copy of the lease contract
- A copy of Driver's License or ID Card if one on file is expired.
- A copy of all signed waivers – check with office to make sure they are on file

MUST PRINT OR TYPE ALL INFORMATION ON THESE FORMS

Today's Date _____ Lease Term: Begin _____ End _____

Owner's Name: _____ Telephone: _____

Owner's Oak Hollow Address: _____

Agency Handling Lease if applicable: _____ Agent: _____

Address: _____

Email: _____ Telephone: _____ Fax: _____

PROPOSED TENANTS

Name of Proposed Lessee (*State exactly as lease will appear*):

Name(s): _____

Contact Phone #s: _____

Number of People Who Will Occupy: _____ Identify Below:

<u>Name</u>	<u>Age</u>	<u>Relationship / Occupation</u>

VEHICLES:

Year _____ Make _____ Model _____ Plate No. _____

Color _____ State _____

Year _____ Make _____ Model _____ Plate No. _____

Color _____ State _____

EMERGENCY CONTACTS:

In the event of an emergency please provide contact information:

Name: _____ Telephone: _____

Name: _____ Telephone: _____

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1. I / We hereby agree for myself and on behalf of all persons who may use the unit which I seek to Lease:
 - a) I / We will abide by all the restrictions contained in the Association Covenants, Bylaws, Rules & Regulations, and restrictions which are or may in the future be imposed by **OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.**
 - b) I / We understand and agree that the Association is authorized to act as the owner's agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by lessees and their guests, of provisions of the Association Covenants and Rules.
 - c) I / We understand that sub-leasing or occupancy of this unit in my / our absence is prohibited.
 - d) I / We understand that any violation of the terms, provisions, conditions, and covenants of the **OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.** documents provides cause for immediate action as therein provided or termination of the leasehold under appropriate circumstances.
2. I / We have received a copy of the Rules & Regulations: Yes____ No____
3. I / We understand that I / We will be advised by the Rental Review Committee/Board of Directors (or their designee) of either acceptance or denial of this application. Occupancy prior to Board approval is prohibited.
4. I / We understand that the acceptance for Lease at **OAK HOLLOW** is conditioned in part upon the truth and accuracy of this application and upon the approval of the Rental Review Committee/Board of Directors (or their designee). Any misrepresentation or falsification of information on these forms will result in the automatic disqualification of my application. Occupancy prior to approval is prohibited.
5. I / We understand that the Association may, pursuant to Section 943.953 (8), Florida Statutes, obtain criminal history information on the individual(s) signing this application. By signing this application, I / we hereby consent to the Association obtaining criminal history information and considering same in connection with my / our application. I / we understand that every effort shall be made by the Association to maintain the confidentiality of the report; however; by signing the application, I / we hereby waive and hold the Association harmless for any claim, action or suit regarding the criminal history information.
6. I / We understand that the Rental Review Committee/Board of Directors (or their designee) of **OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.** may cause to be instituted an Investigation of my / our background as the Board may deem necessary, accordingly, I / we specifically authorize the Board of Directors, Management and **FLORIDA TENANT REPORTING SERVICES** to make such investigation and agree that the information contained in this and the attached application may be used in such investigation, and that the Board of Directors, Officers and Management of **OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.** itself shall be held harmless from any action or claim by me / us in connection with the use of the information contained herein or any investigation conducted by the Rental Review Committee/Board of Directors (or their designee).

In making the foregoing application, I / we am / are aware that the decision of the **OAK HOLLOW PROPERTY OWNERS' ASSOCIATION, INC.** will be final and no reason will be given for any action taken by the Rental Review Committee/Board of Directors (or their designee). I / We agree to be governed by the determination of the Rental Review Committee/Board of Directors (or their designee).

APPLICANT'S SIGNATURE

DATE

APPLICANT'S SIGNATURE

DATE

REALTOR'S/OWNER'S SIGNATURE

DATE