



Date Stamp

The Shores at Berkshire Lakes Master Homeowner's Assoc, Inc. Lease Renewal Checklist

Dear Prospective Tenant,

Please submit the following for approval of the lease in The Shores at Berkshire Lakes:

- _____ Signed Application Checklist
- _____ Completed Renewal Application to Lease
- _____ Completed Background for each adult over the age of 18 once per every other consecutive 6-month renewal period
- _____ \$40 per applicant Background Check Fee Non-refundable (foreign - call for pricing) Payable to **May Management – for each adult over 18**
- _____ Completed Pet Registration form and supplements (*attach previous forms if vaccinations are still up to date*)
- _____ Completed Exhibit A Addendum to Lease
- _____ Completed signature page of Rules and Regulations (*attach previous form and initial and date*)

Unit Address _____

Missing or incomplete information will result in the delay of processing your application. Complete application **MUST** be received 25 days prior to occupancy.

MAXIMUM LEASE OF SIX (6) MONTHS AS OF JULY 31, 2019

Applicant Signature

Applicant Signature

If you have any questions please contact May Management at 239-262-1396 or spalmer@maymgt.com.

Thank You,
May Management Services

11100 Bonita Beach Rs, Bonita Springs, Florida 34135
(239) 262-1396 office

The Shores at Berkshire Lakes Master Homeowner's Assoc, Inc. Application for Approval to Lease

Date Stamp

Street Address _____ Lease 1 / / to / /

Owner Name _____ Phone _____

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:

APPLICANT INFORMATION

Last Name		First		Middle
Home Address			Apartment/Unit #	
City		State		ZIP
Phone #	Cell #		Other Phone #	
Email Address				
Employer		Employer's Phone #		

APPLICANT INFORMATION

Last Name		First		Middle
Home Address			Apartment/Unit #	
City		State		ZIP
Phone #	Cell #		Other Phone #	
Email Address				
Employer		Employer's Phone #		

OCCUPANTS

Please list the name, relationship and date of birth of all occupants not listed above who will be living in this unit.

Full Name	Relationship	Date of Birth

Have you previously leased in The Shores?	If YES, what address?
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CURRENT OR MOST RECENT LANDLORD

Full Name	
Address	
Phone ()	How Long

VEHICLES**No recreational vehicles or trucks permitted unless kept in the garage at all times**

Year	Make	Model	License plate #	State
Year	Make	Model	License plate #	State

EMERGENCY CONTACT

Full Name	
Relationship	Phone ()

DISCLAIMER AND SIGNATURE

In order to facilitate consideration of this application, I/we, the applicant(s), represent that the above information is factual and correct, and agree that any falsification or misrepresentation in this application will justify its disapproval. I/we have received, read and understand the Rules and Regulations of The Shores at Berkshire Lakes Master Homeowner's Assoc, Inc. and will comply.

Signature	Date
Signature	Date

Return this request to:

The Shores at Berkshire Lakes Master Homeowner's Association, Inc.
 c/o May Management Services
 11100 Bonita Beach Rd, Bonita Springs, Florida 34135
 (239) 262-1396 phone
 spalmer@maymgt.com

**APPLICATION APPROVAL**

_____ Approved	_____ Date
_____ Disapproved	_____ By:
	_____ Board Officer or Director

Application for Lease

The Shores at Berkshire Lakes Master Homeowner's Assoc,

Exhibit "A"

**ADDENDUM TO APPROVED LEASE AGREEMENT
AND ASSIGNMENT OF RENTS FROM LANDLORD TO ASSOCIATION FOR AMOUNTS OWED**

The provisions contained herein modify the lease agreement ("Lease") between _____ ("Landlord") and _____ ("Tenant"), entered into on _____, for the lease renewal of real property located at _____, and serve as an agreement between Landlord and The Shores at Berkshire Lakes Master Homeowner's Association, Inc. ("Association") to assign rents payable to Landlord pursuant to the Lease from Landlord to the Association for past-due and owing assessments, interest, costs, and reasonable attorneys' fees, which amounts are due pursuant to obligations of Landlord arising from the Amended and Restated Declaration of Restrictions and Protective Covenants, recorded at Instrument No. 5732800 in the Public Records of Collier County, Florida, and all valid amendments thereto.

Execution of this Addendum is a required condition of rental of a Unit, pursuant to the authority of the Association contained in the Declaration. The Landlord and Tenant hereto expressly agree that the Lease shall be amended as provided herein, and the following terms shall be incorporated into the Lease. Landlord and Tenant further agree that Association shall be considered a named party to the Lease and this Addendum for the purpose of enabling the Association to enforce the provisions of its Governing Documents and the covenants of this Addendum. In the event of any conflict between the terms and conditions of the Lease and this Addendum, the Addendum shall govern the respective rights and responsibilities of the parties hereto.

Landlord and Tenant further acknowledge and agree that in connection with the approval of the lease application by the Association, it will be necessary for the Association to obtain and consider information regarding Tenant and all proposed Occupants of the Unit, and Tenant specifically authorizes the Association to obtain and consider background information, including financial information, if deemed appropriate by the Association, personal references, and other information deemed relevant by the Association. Further, Landlord and Tenant acknowledge that the Association may require an interview with prospective Tenants/Occupants of a Unit prior to occupancy. Landlord and Tenant agree that no proposed Tenant or Occupant shall take possession of a Unit until at least five (5) days following receipt of the Association's written approval of the Lease. Landlord and Tenant represent that all information contained in the application for Lease (and supporting materials) submitted to the Association are complete, accurate, and truthful. Landlord and Tenant acknowledge that intentional or negligent material omissions or misrepresentations in the application and supporting materials shall constitute grounds for disapproval of a Lease application, or termination of the Lease if such omissions or misrepresentations are discovered after approval thereof.

1. USE: Tenant (which term shall at all times in this Addendum include all proposed Occupants of the Unit) will use the premises only for single family, residential purposes by Tenant and his Family members who have been listed and approved in Tenant's application for Association approval of this Lease. Single family shall mean one natural person; two or more natural persons who commonly reside together as a single housekeeping unit, each of whom is related by blood, marriage, or adoption to each of the others; or two or more natural persons meeting the requirements of the preceding provision, except that there is among them not more than one person who is not so related to some or all of the others. Tenant will make no unlawful, improper, or offensive use of the leased property, nor permit the commission of any act which constitutes a public or private nuisance.

2. COMPLIANCE WITH THE GOVERNING DOCUMENTS: Any infraction of the provisions or restrictions set forth in the Declaration, Articles of Incorporation, Bylaws, and the Rules and Regulations of the Association, as amended from time to time (hereinafter the "Governing Documents") by the Tenants or their Family, Guests, or invitees shall be deemed a breach of the Lease, and the Association or Landlord shall

LANDLORD(S):

Date: _____

Date: _____

TENANT(S):

By: _____

Date: _____

By: _____

Date: _____

ASSOCIATION:

By: _____

Date: _____

Title: _____

The Shores at Berkshire Lakes

GATE ACCESS - AUTOMOBILE BAR CODE / CLUBHOUSE ACCESS CARD

Date: _____ New Owner: Yes – No **PLEASE PRINT**

First: _____ Last: _____

Shores Address: _____

Email Address: _____

Telephone number used for gate access directory: _____

GATE ACCESS - AUTOMOBILE BAR CODE

Make/Model Vehicle(s)

(1) _____ Tag# (1) _____

(2) _____ Tag# (2) _____

(3) _____ Tag# (3) _____

CLUBHOUSE ACCESS CARDS

NUMBER OF ACCESS CARDS REQUESTED

OFFICE USE ONLY

#1 _____

#2 _____

#3 _____

ASSOCIATION PET REGISTRATION

PLEASE TYPE OR PRINT LEGIBLY THE FOLLOWING INFORMATION:

OWNER INFORMATION

Name(s)

Community Name

Address 1

PET INFORMATION

Name

Date of Birth

Sex

Weight

Species

Breed

Primary Color

Secondary Color
(if applicable)

License #

Expiration Date

County/State

Rabies Vaccination Date

Microchip #
(if applicable)

PHOTO IDENTIFICATION

Please provide a picture of you animal attached in the space below.

VETERINARIAN INFORMATION

Name

Address

City

State

ZIP

Phone #

Fax #

DISCLAIMER AND SIGNATURE

I/we represent that the above information is factual and correct and agree that any falsification or misrepresentation in this registration form will justify further investigation by the Board. I/we agree that the above reference pet is licensed with Collier County per their Animal Control Ordinance. I/we agree that if the above referenced pet dies, I/we will notify Anchor Associates of the death and will complete a new form if a replacement pet is obtained.

I/we understand that the ability to keep such a pet is a privilege, not a right. Failure to adhere to the Declaration and Rules & Regulations regarding pets shall result in action taken by the Board of Directors.

Signature

Date

Signature

Date

REGISTRATION REQUIREMENTS

The following items must be included in order to properly register your pet:

- _____ Completed Pet Registration form
- _____ Copy of Certificate of Vaccinations
- _____ Picture of your pet

Return this registration form to:

c/o May Management Services
 211100 Bonita Beach Rd
 Bonita Springs, Florida 34135
 (239) 262-1396 phone
 spalmer@maymgt.com

Date Stamp

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