

**HARBOR HOUSE WEST  
RENTAL PACKAGE  
NOTICE TO OWNERS**

NO OWNER MAY LEASE A UNIT WITHOUT OBTAINING PRIOR WRITTEN APPROVAL OF THE BOARD OF DIRECTORS. TENANTS MOVING IN WITHOUT BOARD APPROVAL MAY BE SUBJECT TO EVICTION AT THE OWNER'S EXPENSE.

A PRE-APPROVAL INTERVIEW MAY BE REQUIRED. ALL TENANTS ARE REQUIRED TO MEET WITH A BOARD MEMBER TO ENSURE THEY UNDERSTAND THE RULES & REGULATIONS EITHER BEFORE OR IMMEDIATELY AFTER THEY MOVE IN.

YOU SHOULD REFER TO OUR GOVERNING DOCUMENTS FOR POLICIES AND GUIDELINES FOR RENTALS (including prohibition of pets).

YOU MUST PROVIDE YOUR TENANT WITH A COPY OF THE ASSOCIATION'S RULES & REGULATIONS.

YOU MUST PROVIDE YOUR TENANT WITH INFORMATION RELATED TO THE FIRE SPRINKLER RETROFITTING OPT-OUT.

YOU MUST PROVIDE A \$1,000.00 DEPOSIT TO THE ASSOCIATION IF YOU RENT YOUR UNIT.

ALL COMPLETED APPLICATIONS AND FORMS, ALL NECESSARY PAYMENTS TO HARBOR HOUSE WEST, AND A COPY OF THE SIGNED LEASE MUST BE SUBMITTED AT LEAST FIFTEEN DAYS PRIOR TO MOVE IN.

ALL FEES AND MONIES OWED HARBOR HOUSE WEST MUST BE CURRENT BEFORE THE APPLICATION CAN BE APPROVED.

¶ 718.116(4) If the association is authorized by the declaration or bylaws to approve or disapprove a proposed lease of a unit, the grounds for disapproval may include, but are not limited to, a unit owner being delinquent in the payment of an assessment at the time the approval is sought.

**HARBOR HOUSE WEST  
RENTAL PACKAGE  
CHECK LIST**

PLEASE PROVIDE THE FOLLOWING FEES AND DOCUMENTS TO THE ASSOCIATION'S PRESIDENT OR MANAGER.

**FEES REQUIRED WITH RENTAL APPLICATION:**

\$25.00 APPLICATION FEE PER APPLICANT (one fee for couples)  
\$75.00 BACKGROUND CHECK FEE (per applicant)  
\$1000.00 ESCROW DEPOSIT

**SIGNED DOCUMENTS REQUIRED AT TIME OF APPLICATION:**

RENTAL APPLICATION (including acknowledgement of receipt of  
Rules & Regulations and Fire Sprinkler Retrofitting Opt-Out Info)  
RESIDENT CONTACT INFORMATION  
BACKGROUND CHECK FORMS  
ADDENDUM TO LEASE  
LEASE

KEY TO THE UNIT (if not previously provided)

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**INTERNAL USE ONLY:**

Above fees and completed/signed documents received by  
\_\_\_\_\_(President or Association Manager)  
\_\_\_\_\_(Date)

Application Approved/Disapproved (circle one) by  
\_\_\_\_\_(Board Member)  
\_\_\_\_\_(Date)

**HARBOR HOUSE WEST, INC.  
226 GOLDEN GATE POINT  
SARASOTA, FLORIDA 34236**

**RENTAL APPLICATION**

**MUST BE SUBMITTED AT LEAST 15 DAYS PRIOR TO OCCUPANCY**

UNIT \_\_\_\_\_ 226 HARBOR HOUSE WEST, SARASOTA, FL 34236

OWNER(S)

NAME \_\_\_\_\_

PHONE \_\_\_\_\_

RENTAL PERIOD

FROM \_\_\_\_\_ TO \_\_\_\_\_ (90 DAY MINIMUM)

NAME OF

APPLICANT \_\_\_\_\_

NAME OF

APPLICANT \_\_\_\_\_

CURRENT ADDRESS

STREET \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME

PHONE \_\_\_\_\_

PROVIDE THE FOLLOWING INFORMATION FOR EACH APPLICANT:

CELL PHONE \_\_\_\_\_

E-MAIL  
ADDRESS \_\_\_\_\_

BUSINESS  
PHONE \_\_\_\_\_

EMPLOYER \_\_\_\_\_

EMPLOYMENT DATES \_\_\_\_\_

EMPLOYER  
ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMPLOYER PHONE \_\_\_\_\_

REFERENCES (3 INCLUDING CONTACT NUMBER AND  
RELATIONSHIP):

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

PHONE \_\_\_\_\_

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

PHONE \_\_\_\_\_

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

PHONE \_\_\_\_\_

APPLICANT'S EMERGENCY CONTACT:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME/CELL PHONE \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

OWNER'S EMERGENCY CONTACT (if someone other than the Owner):

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME/CELL PHONE \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

AUTOMOBILE TO BE PARKED IN DESIGNATED PARKING SPOT:

MAKE & MODEL \_\_\_\_\_

YEAR \_\_\_\_\_

TAG/STATE \_\_\_\_\_

I/we have read and understand this rental application.

I/we represent that all information provided on this rental application are true, accurate and complete.

I/we understand that I/we shall apply for approval of the proposed lease and consent to an interview at least 15 days prior to the commencement of the proposed term.

I/we understand that the lease will contain an addendum which shall contain an agreement of the lessee(s) to comply with the Condominium Documents.

I/we understand that the lease will contain an addendum appointing Harbor House West Condominium Association, Inc. as agent for the unit Owner so the Association may act on behalf of the Owner to enforce the lease, evict the lessee(s) or otherwise.

I/we acknowledge that I/we have read and understand the Condominium Documents and Rules and Regulations of Harbor House West, Inc. and I/we will abide by same (including the prohibition of pets), as well as new Rules and Regulations that may be adopted in the future; and have read and understand the Association's fire sprinkler retrofitting opt-out information. The most recent versions of the documents are available on the Association's website ([www.harborhousewest.com](http://www.harborhousewest.com)); paper copies will be provided upon request.

I/we understand that occupancy cannot be gained until the Harbor House Board of Directors approves this application in writing.

**AUTHORIZATION OF RELEASE OF INFORMATION:** I/we hereby authorizes an investigative consumer report including, but not limited to, residential history (rental and/or mortgage), employment history, credit history, court records, criminal background checks and credit records. I/we consent to you making further inquiries concerning this application particularly the references given.

Applicant(s) acknowledge(s) that failure to provide correct and true information constitutes a criminal offense in the state of Florida.

All parties must sign this rental application before it can be processed.

The application fee and background check fees are non-refundable.

APPLICANT \_\_\_\_\_

APPLICANT \_\_\_\_\_

UNIT OWNER \_\_\_\_\_ Unit # \_\_\_\_\_

UNIT OWNER \_\_\_\_\_ Unit # \_\_\_\_\_

**HARBOR HOUSE WEST**  
**RESIDENT CONTACT INFORMATION**

Name(s) \_\_\_\_\_

Unit Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**Emergency Contact Information:**

Contact Name & Relationship \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

The Association is/is not (circle one) authorized to share the information above (excluding emergency contact information) with residents and owners of Harbor House West.

Sign & Date \_\_\_\_\_

Sign & Date \_\_\_\_\_



## **TENANT SCREENING RELEASE FORM**

### **NOTICE TO APPLICANT REGARDING BACKGROUND INVESTIGATION**

Notice is hereby given that \_\_\_\_\_ ("Requestor") intends to instruct ALLSTAR BACKGROUNDS, a Consumer Reporting Agency, as defined by the Fair Credit Reporting Act ("FCRA"), to obtain information about you in the course of Requestor's consideration of your application for tenancy. Thus you may be the subject of a "consumer report," or possibly an "investigative consumer report," defined by the FCRA as a background report that includes information about one's character, general reputation, personal characteristics and mode of living, and that might involve personal interviews with sources such as neighbors, friends or associates. Reports may include your Credit Report and reports may be obtained at any time after receipt of authorization and may be updated periodically if you remain a tenant, as permitted by law. The scope of this notice and authorization is all-encompassing, allowing Requestor and its agent to obtain from any outside organization all types of consumer reports and investigative consumer reports now and throughout the course of your tenancy, to the extent permitted by law.

### **APPLICANT'S ACKNOWLEDGMENT AND AUTHORIZATION**

**By signing below, I acknowledge receipt of a "NOTICE REGARDING BACKGROUND INVESTIGATION" and "A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT"** and certify that I have read and understand both documents. Furthermore, I hereby authorize the obtaining of consumer reports and/or investigative consumer reports at any time, as long as I remain an employee, volunteer or tenant of Requestor, to the extent permitted by law. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university, information service bureau, employer, drug screening firm, reference, landlord, and/or its record custodian, to furnish any and all background information sought by Requestor or by ALLSTAR BACKGROUNDS, acting on Requestor's behalf. I agree that a photocopy or fax of this Authorization shall be as valid as the original.

I understand that I may contact ALLSTAR BACKGROUNDS to request a copy of any Consumer Report about me, if one is obtained by Requestor. I understand that I have the right, upon written request made within a reasonable time, to inquire about the nature and substance of the information about me contained in ALLSTAR BACKGROUNDS's files. I understand that I have the right to inspect those files during regular business hours, having given reasonable notice and provided proper identification, and that I may be accompanied by one other person. I understand that I should direct such a request to ALLSTAR BACKGROUNDS, and that ALLSTAR BACKGROUNDS is required to make available to me someone who can explain the contents of my file.

By checking this box, \_\_\_\_\_ I indicate that I would like to receive a copy of any Investigative Consumer Report about me, if one is obtained by Requestor.

Your Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**PLEASE PRINT**

\_\_\_\_\_  
First Middle Last  
(As it appears on your Driver's License)

\_\_\_\_\_  
Date of Birth (MM/DD/YYYY) (For identification purposes only)

\_\_\_\_\_  
Maiden Name/Any AKAs Social Security Number

\_\_\_\_\_  
Driver's License Number State of Issue

**PLEASE PROVIDE 7 YEAR'S ADDRESS HISTORY**

\_\_\_\_\_  
Current Address City State Zip Years/Months

\_\_\_\_\_  
Name of Current Landlord Phone Fax

\_\_\_\_\_  
Previous Address City State Zip Years/Months

\_\_\_\_\_  
Previous Address City State Zip Years/Months

**PLEASE PROVIDE CURRENT EMPLOYER INFORMATION**

\_\_\_\_\_  
Current Employer Address City State Zip

Start Date \_\_\_\_\_

**Applicant:** Return this completed, signed "**RELEASE**" page to Requestor.

**(FOR OFFICE USE ONLY)**

**Requestor:** Please **UPLOAD** this signed "**RELEASE**" to ALLSTAR BACKGROUNDS or FAX to ALLSTAR BACKGROUNDS at **888-502-1299**

**Tenant Screen Package:** \_\_\_\_\_

## HARBOR HOUSE WEST

### ADDENDUM TO LEASE

UNIT \_\_\_\_\_ 226 HARBOR HOUSE WEST, INC.

FROM \_\_\_\_\_ TO \_\_\_\_\_

LESSEE(S) AND UNIT OWNER(S) MUTUALLY AGREE THAT LESSEE(S) AND UNIT OWNER(S) HEREBY APPOINT HARBOR HOUSE WEST, INC. AND ITS BOARD OF DIRECTORS AS AGENT FOR THE UNIT OWNER AND ACKNOWLEDGE THAT HARBOR HOUSE WEST AND ITS BOARD OF DIRECTORS MAY ACT ON THE BEHALF OF THE OWNERS(S) TO ENFORCE THIS LEASE, EVICT THE LESSEE(S) OR OTHERWISE. FURTHER, IT IS AGREED THAT EVERY LEASE SHALL CONTAIN OR BE DEEMED TO CONTAIN A PROVISION THAT THE LESSEE IS SUBJECT TO THE DECLARATION, ARTICLES OF INCORPORATION, BYLAWS AND RULES AND REGULATIONS OF THE ASSOCIATION.

LESSEE \_\_\_\_\_ DATE \_\_\_\_\_

LESSEE \_\_\_\_\_ DATE \_\_\_\_\_

OWNER \_\_\_\_\_ DATE \_\_\_\_\_

OWNER \_\_\_\_\_ DATE \_\_\_\_\_

**HARBOR HOUSE WEST, INC.**

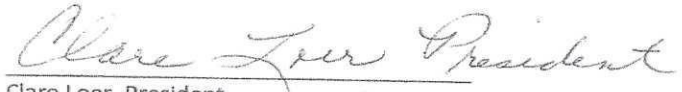
**WRITTEN NOTICE OF  
VOTE TO FOREGO FIRE SPRINKLER SYSTEM RETROFITTING**

This Notice is being sent to each Unit Owner in Harbor House West, Inc., to notify each Owner that the Association has received the affirmative vote of a majority of all Voting Interests in the Association to forego retrofitting of the Common Elements, Association Property and Units with a fire sprinkler system, as permitted by Section 718.112 (2) (I), Florida Statutes (2016).

A copy of this Notice must be provided by the Unit Owner to any new Owner prior to closing and furnished to any tenant or lessee, prior to entering into a rental agreement.

Dated: 12-14-2016, 2016.

**BY ORDER OF THE BOARD OF DIRECTORS**

  
Clare Loer, President

ACTIVE: 9217205\_1

Additional information including the Governing Documents and Rules & Regulations can be found on the Association's website. A paper copy will be provided if requested.

[www.harborhousewest.com](http://www.harborhousewest.com)