THE COTTAGES AT PELICAN LANDING HOMEOWNERS ASSOCIATION

SALE AND LEASE FORM

This form is required to be notarized
Please read application carefully and fill in all applicable blanks
Contact PLCA for their requirements: 239.947.5977

FOR SALES:

☐ $200.00 application fee payable to The Cottages at Pelican Landing must accompany this application. A copy of the sales contract is required.

☐ **$2000 CAPITAL CONTRIBUTION IS DUE AT CLOSING**.

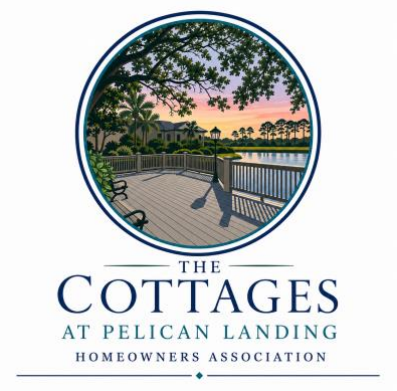
FOR LEASES:

☐ $100.00 application fee payable to Resort Management must accompany this application. A copy of the lease agreement is required. The Cottages governing documents permit a lease of at least 30 days once per year.

Please Note: Sales applications must be received 30 days prior to closing.
Lease applications must be received 30 days prior to the start of the lease.
A copy of the lease or sales contract must be submitted with this form.

RESORT MANAGEMENT

Mail to:
Resort Management
2685 Horseshoe Drive South, Suite #215
Naples, FL 34104
Phone: 239-649-5526
Fax: 239-403-1061
www.resortmanagementfla.com



Check one: ☐ Home Sale ☐ Lease

For Buyers Only: We plan to use the residence for ☐ permanent ☐ part time ☐ rental

Application Date:_____ Sale Closing Date:_____

Current Owner Name:_____

Current Owner Cottages Address: _____

Lease Only: Dates: from _____, 20_____ to _____, 20_____

Applicant Name 1: _____

Phone: _____ Cell: _____ Email: _____

Social Security Number: _____ Birth Date: _____

Street Address:_____

City: _____ State_____ Zip Code_____

Applicant Name 2:_____

Phone: _____ Cell: _____ Email:_____

Social Security Number:_____ Birth Date: _____

Street Address:_____

City:_____ State_____ Zip Code_____

Previous Address (past 5 years only): _____

_____

☐ Retired ☐ Currently Employed By:_____

Other family member(s) residing full-time in the home:

Age_____ Name:_____Relationship:_____

Vehicles:

Make/Model: _____ License No. _____

Make/Model: _____ License No. _____

Pets (limit 2) Type: _____ Pet Vaccinations Current? ☐ Yes ☐ No

Emergency Contact:

Name: _____ Phone: _____

THE COTTAGES
AT PELICAN LANDING
HOMEOWNERS ASSOCIATION

We have received and read a copy of the *Declaration of Protective Covenants, Conditions, Restrictions and Easements for The Cottages at Pelican Landing Neighborhood*. We agree to abide by all of its provisions and those of all the recorded documents, and by all Rules and Regulations made pursuant thereto.

Signature(s) authorizes The Cottages at Pelican Landing Homeowners Association, Inc. to secure credit and other information.

Signature ______________________________________ Date _________________________

____
print name

Signature ______________________________________ Date _________________________

____
print name

I hereby certify that on the _________ day of ________________________, ___________, personally appeared before me, _____________________________ and ______________________________, known to be the individual(s) described herein and who executed the foregoing instrument, and acknowledged that he/she/they signed the same of his/her/their free will and voluntary act and deed, for the uses and purposes therein expressed.

WITNESS my hand and official seal

____
Notary Public

My Commission Expires: ___________________________

♦♦

The Cottages Board of Directors

Approved ☐ Denied ☐ Date ____________________

____
Board Signature Title