



Village 1-5 Assoc, Inc., 2929 SE Ocean Blvd - Clubhouse #1, Stuart Florida 34996 - 772.286.9987

LEASE APPLICATION for Unit # \_\_\_\_\_

Lessee/Tenant Name

- Please print -

Lessor/Owner Name

Occupancy: # of months: \_\_\_\_\_ Dates - From: \_\_\_\_\_ To: \_\_\_\_\_

All Leases are subject to:

- Minimum lease period is three (3) months. Maximum lease period is one (1) year.
• A personal interview between Lessee and a Board Representative.
• The approval of the Cedar Pointe Village (CPV) 1-5 Board of Directors (BOD).

INSTRUCTIONS

- Legibly COMPLETE ALL information on this form and submit to the CPV Office. Board of Directors approval is required and could take 30 days. Misrepresentation, falsification or incomplete information may disqualify or delay Application.
\*Service member applications will be processed and notified within 7 days of submission.
• Submit this application with:
1. \$100 Application Fee.
2. Copy of Tenant's Driver's License.
3. Copy of Lease Contract.

TENANTS INFORMATION

Tenant-1 Name: \_\_\_\_\_ Tenant-2 Name: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Ph. Number: \_\_\_\_\_

Full Names of Occupants: \_\_\_\_\_

Current Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ ST Zip

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Employed Retired \*Active Service ~ Dates: From \_\_\_\_\_ To \_\_\_\_\_

Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ ST Zip

(3) TENANT PERSONAL REFERENCES

1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ ST Zip

2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ ST Zip

LEASE APPLICATION for Unit #\_\_\_\_\_

INVESTIGATIVE CONSUMER REPORT AUTHORIZATION
aka Background Check

I, the undersigned consumer, do hereby authorize Fidelity Data Service to procure a consumer report and/or investigative consumer report on me. I understand that this authorization and release shall be valid for subsequent consumer and/or investigative consumer reports during my period of tenancy.

These above-mentioned reports may include, but are not limited to: information as to my character, general reputation and personal characteristics discerned through employment and education verifications, personal reference, personal interviews, my personal credit history based on reports from any credit bureau, my driving history, including any traffic citations, a social security number verification, present and former addresses, criminal and civil history/records, any other public record.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to Fidelity Data Service by and through its independent contractor including but not limited to: any and all courts, public agencies, law enforcement agencies and credit bureaus; regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

I further authorize the Condominium Owners Association (COA) to share a copy of this investigative report with the Owner (landlord), if requested, for their review on a confidential basis in order for them to determine my suitability as a renter. I understand that they will only review the investigative report and will not be given the report either in whole or in part.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report of which I am the subject upon my written request to Fidelity Data Service, if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C. § 1681et.seq. and Cal. Civ. Code § 1786.

Print Full Name-1: \_\_\_\_\_ Name-2: \_\_\_\_\_

Social Security#-1: \_\_\_\_\_ Social Security#-2: \_\_\_\_\_

Date of Birth-1: \_\_\_\_\_ Date of Birth-2: \_\_\_\_\_

I/we have completed this application providing accurate and current information to the best of my knowledge and authorize the above mentioned investigative consumer report.

Tenant-1 Signature Date Tenant-2 Signature Date



OWNERS INFORMATION

Address: \_\_\_\_\_
Street City ST Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Personal Friend/Relative OR Referral: \_\_\_\_\_

Real Estate Agent: \_\_\_\_\_ Company: \_\_\_\_\_
Street City ST Zip

Tenant has been informed that they must abide by Cedar Pointe Village 1-5 Rules & Regulations.

Owner/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

