

**Bay Harbor Club of Bonita Beach
Condominium Association, Inc**

26225-26235 Hickory Blvd
Bonita Springs, FL 34134

**Return Completed Application to:
salesandrentals@cambridgeswfl.com**

TENANT OCCUPANCY APPLICATION

In Accordance With The Governing Documents Of This Association,
This Form Must Be Submitted For Any Lease Or Rental **20 Days Prior To Occupancy.**

BOARD APPROVAL: Must Be Received Prior To Occupancy.

LEASE TERM: Minimum 30 days or 1 Month; Maximum Of 12 Months

Please include all information. An incomplete application will not be accepted and will be returned.

Owner Of Record _____ Bldg / Unit _____

Phone # _____ Email Address _____

Reserved Parking Space Number _____ Boat Slip Number _____

Term Of Lease: From _____ To _____

Applicant's Name _____

Co Applicant's Name _____

Applicant's Present Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell # _____

Email Address _____

Condominium documents of Bay Harbor Club Condominium Association state that:

- All units are for single family residence only.
- Leased units have a maximum occupancy of 5 persons including children.

Application is to be returned to salesandrentals@cambridgeswfl.com or mailed to 2335 Tamiami Trail North, Suite 402, Naples, FL 34103

Bay Harbor Club Tenant Occupancy Application

State the name and relationship to Tenant of all other persons who will be occupying the unit:

Name

Relationship

Auto #1: Make _____ Color _____ Yr _____ Lic _____ St _____

Auto #2: Make _____ Color _____ Yr _____ Lic _____ St _____

Description of any bicycles _____

I/we understand that no pets will be permitted on the premises Tenant's Initial(s) _____

I/we understand that recreational vehicles, trucks, boats on trailers, or trailers have restricted parking, as explained in the rules and regulations. Tenant's Initial(s) _____

I/we acknowledge receipt of and have read and agree to abide by the rules and regulations for Bay Harbor Club Condominium Association, Inc. Tenant's Initial(s) _____

Signature Of Applicant _____ Date _____

Signature Of Co-applicant _____ Date _____

I/we acknowledge that unit owners are responsible for fines and penalties incurred by the action(s) of their guests, tenants, or other person in their unit. Owner's Initial(s) _____

Signature Of Owner or Agent _____ Date _____

Name Of Real Estate Co (If Applicable) _____

Agent Address _____

Agent Email Address _____

Agent Phone # _____

ACTION OF ASSOCIATION

Approved _____ Disapproved _____ Date of decision _____

By _____ Title _____