



**FOUNTAIN VIEW RV LOT OWNERS ASSOCIATION, INC.
C/O KPG ACCOUNTING SERVICES, INC.**

3400 Tamiami Trail N. #302

Naples, FL 34103

Ph: (239) 434-8866 Fax: (239) 791-1187

APPLICATION FOR APPROVAL TO LEASE

Instructions: Please submit application, lease agreement and fees at least FOURTEEN (14) day prior to lease start date.

SUBMIT WITH APPLICATION:

- Copy of signed Lease Agreement
- \$50 NON-REFUNDABLE processing fee payable to KPG ACCOUNTING SERVICES, INC.
- \$50 **PER ADULT** FOR NON-REFUNDABLE Criminal Background fee payable to FOUNTAIN VIEW RV LOT OWNERS ASSOCIATION, INC.
- Copy of ID's
- Completed background check for each adult

Please type or print legibly the following information:

Current Owner: _____

Property Address: _____

Lease Start Date: _____ Lease End Date: _____

Name of Rental Agent/Agency Involved: _____

Agent's Ph #: _____ Agent's Email: _____

First Applicant's Full Legal Name: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Cell Phone #: _____

Email: _____

Business or Profession (even if retired): _____

Are you an active service member as defined by Florida Statute 250.01(21)? Yes _____ No _____

Second Applicant's Full Legal Name: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Cell Phone #: _____

Email: _____

Business or Profession (even if retired): _____

Are you an active service member as defined by Florida Statute 250.01(21)? Yes _____ No _____

The unit owner’s documents of Fountain View Lot Owners Association provide an obligation of unit owners that all units are for single family residence only. Please state the name, relationship and age of all other persons who will be occupying the unit during the full lease term.

NAME	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Person to be notified in case of emergency: _____

Address: _____

Phone #: _____ Email: _____

VEHICLES: No commercial or oversized vehicles

Make/Model: _____ Color: _____ Plate #: _____ State: _____

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I/We am/are aware of and agree to abide by the Fountain View Association Documents and Rules & Regulations. I/We acknowledge receipt of a copy of the Association rules.

(Initial Here) _____ **(Initial Here)** _____ *(Property owner should provide renter with Community Documents or they may be obtained through Lee County or the Fountain View website.)*

I/We understand that the Association, in the event it approves a lease, is authorized to act as the owner’s agent, with full power and authority to take whatever action may be required, including eviction, to prevent violations by Lessees and their guests, in accordance with the Documents and the Rules and Regulations of the Association.

I/ We verify that the statements above are true and correct. I/We hereby authorize verification of information I/we provide and communication with any and all names listed in this application. I/We consent to further inquiry concerning this application, particularly of the references provided.

I/We understand that any discrepancy of lack of information may result in rejection of this application.

APPLICANT SIGNATURE

DATE

APPLICANT SIGNATURE

DATE

Action taken by the Board of Directors:

- Applicant Approved
- Applicant Disapproved

Association President/Board Member/Manager

Date