

Island House Northeast COA, Inc.
c/o Sea Breeze Community Management Services, Inc.
4227 Northlake Boulevard
Palm Beach Gardens, FL. 33410
Phone: (561) 626-0917 Fax: (561) 626-7143
www.seabreezecms.com

APPLICATION – LEASE
(updated 10/2018)

Information is required on all applicants. This application is to be completed by the unit owners and proposed lessee(s) and submitted at least thirty days prior to the proposed LEASED DATE.

**MAIL OR DROP OFF APPLICATION PACKAGE TO OUR OFFICE AT SEA BREEZE.
FAX COPIES WILL NOT BE ACCEPTED AS APPLICATION IS INCOMPLETE**

If copies are needed a charge of 25 cents per page is required

- ___ 1. Fill in the blanks on the Application Form and Acknowledgement section. (pg 2)
- ___ 2. Each applicant must sign the Certificate of Approval. (pg 3)
- ___ 3. Provide a copy of the executed lease contract.
- ___ 4. Provide a picture ID for each adult to be residing in the unit.
- ___ 5. **\$50.00 CASH, MONEY ORDER, OR CASHIER'S CHECK ONLY** for a non-refundable Application fee made payable to **ISLAND HOUSE NORTHEAST COA, INC.**
- ___ 6. **\$50.00 CASH, MONEY ORDER, OR CASHIER'S CHECK ONLY** for a non-refundable Processing fee made payable to **SEA BREEZE CMS, INC.**

Enclosed for your convenience are the rules and regulations of the Association.

Application Form

1. Name(s) of Unit Owner(s) _____
2. Address of Proposed Unit to be Leased _____
3. Name of Proposed Lessee(s) _____
4. Proposed Lessee Phone Number _____
5. Email Address of Proposed Lessee(s) _____
6. List each person to reside in the unit (including children)

<u>NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
7. By signing this application, Lessee(s) agrees that he/they have received and read all of the Condominium documents for the Condominium and further agree to abide by all of the terms, Covenants, and conditions of the Documents and Regulations.
8. Lessee(s) information:
 - a. Employer or business, if self-employed:
Name _____ Phone _____
Address _____
Position _____
 - b. Personal References (other than family members):
 - (1) Name _____ Phone _____
Address _____
 - (2) Name _____ Phone _____
Address _____

ISLAND HOUSE NORTHEAST CONDOMINIUM ASSOCIATION, INC.
ACKNOWLEDGEMENT

As a prospective lessee, we are aware of all information submitted in the Application, and agree to be bound by all the terms, conditions, and restrictions contained in all or any of the Documents referred to above.

Date of Application: _____

Signature(s) of Prospective Lessee

Printed Names(s)

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CERTIFICATE OF APPROVAL

The undersigned authorized representative of **ISLAND HOUSE NORTHEAST CONDOMINIUM, INC.** hereby certifies that the proposed conveyance of the following unit has been approved as written below:

Unit Address: _____

Owner(s): _____

Applicant(s): _____

The above Applicant(s) as evidenced by Applicant(s) signature(s) below hereby acknowledge receipt of the Declaration of Covenants, Articles of Incorporation, By-Laws, Rules and Regulations and any Amendments to the Documents for the Association, and agrees to be bound by said Documents.

Applicant(s) Printed Name

Applicant(s) Printed Name

Applicant(s) Signature

Applicant(s) Signature

Date

Date

This is to certify that the above-named Applicant(s) have complied with the above statements and thereby obtained the approval of **ISLAND HOUSE NORTHEAST COA, INC.**

By: _____ As: _____ Date: _____
On behalf of the Board of Directors