

Milano Recreation Association, Inc.
RENEWAL Application for Approval to Lease

Please check: Section I _____ Section II _____ Section III _____ Section IV _____

NOTE: Lease terms are restricted to a minimum of SIX (6) months or 180 days, and a maximum of two (2) times per year. This application form must be submitted along with a copy of the new lease agreement at least THIRTY (30) days prior to the new lease term.

APPROVAL MUST BE RECEIVED PRIOR TO THE START DATE OF THE NEW LEASE TERM. IF APPROVAL IS NOT RECEIVED PRIOR TO THE NEW LEASE TERM, THE OWNER MAY BE SUBJECT TO A FINE OF \$100.00 PER DAY, UP TO \$5,000.00.

Milano Property Address: _____

Current Owner of Record: _____

Owner's Current Address: _____

Current Owner's Email: _____ Phone Number: _____

Term of Lease: From: _____ Through: _____

THE UNDERSIGNED BELOW HEREBY MAKES THE APPLICATION FOR RENEWAL IN THE MILANO SECTION 1 RESIDENT'S ASSOCIATION, INC. THE APPLICANT REPRESENTS THAT THE FOLLOWING INFORMATION IS TRUE AND CORRECT AND CONSENTS TO FURTHER INVESTIGATION CONCERNING THIS INFORMATION OR ANY INFORMATION WHICH COMES FROM THAT INQUIRY, WHICH IS REASONABLY NECESSARY FOR APPROVAL OF THIS REQUEST.

Current Tenant Name(s): _____

Phone: _____ Email: _____

Are there any new residents in the unit? Yes / No (Circle) If yes, please complete the following:

New Applicant Name: _____

Present Address: _____

DOB: _____ Phone: _____ Email: _____

Milano Recreation Association, Inc.
c/o Frankly Coastal Property Management
(239) 774-7088
support@collierfinancial.net

New Applicant Name: _____

Present Address: _____

DOB: _____ Phone: _____ Email: _____

Any new occupants over the age of 18 will be subject to a background check. Please submit this application form with a copy of the new lease agreement.

Are there any new vehicles (circle one)? Yes -- (please complete attached vehicle registration form)
No -- (please take photo of parking sticker(s) & submit with renewal)

**REMINDER: ONLY 2 VEHICLES ARE ALLOWED PER DWELLING UNIT.
CARS MUST BE PARKED IN ENCLOSED GARAGE OR DRIVEWAY.**

Auto: Make/Model: _____ Color: _____ Yr: _____ Lic#: _____ St: _____

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YOUR SIGNATURE WILL ACKNOWLEDGE YOUR AGREEMENT TO COMPLY WITH ALL RULES & REGULATIONS AS STATED IN THE DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS UNDER "USE RESTRICTIONS".

SIGNATURE OF APPLICANT: _____ Date: _____

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Submit application to: support@collierfinancial.net

ACTION OF BOARD OF DIRECTORS:

Approved: _____ Disapproved: _____ Date of Decision: _____

By: _____ or _____
Association President/Secretary Manager for the Association