

Property Address _____

JENSEN BEACH COUNTRY CLUB

c/o Coastal Property Management

10 SE Central Parkway, #400

Stuart, FL 34994

Office: (772) 600-8900 Fax: (772) 266-9801

Lease Application Check List

All items must be submitted on your application.

This form must be submitted with all other necessary paperwork.

General submission requirements

- ☐ Completed executed application
- ☐ Fully executed lease agreement
- ☐ \$150 Application fee (non-refundable) – Please make check payable to JENSEN BEACH COUNTRY CLUB
- ☐ \$75 Background Check fee (non-refundable) **per applicant/single adult** – Please make check payable to JENSEN BEACH COUNTRY CLUB

☐ Tenant Realtor Info

Company Name: _____

Company Address: _____

Company Phone: _____

Company Email: _____

☐ Owner Realtor Info

Company Name: _____

Company Address: _____

Company Phone: _____

Company Email: _____

AN ORIENTATION INTERVIEW WILL BE REQUIRED

JENSEN BEACH COUNTRY CLUB
LEASE APPLICATION
c/o Coastal Property Management
10 SE Central Parkway, #400
Stuart, FL 34994
Office: (772) 600-8900 Fax: (772) 266-9801

APPLICATION INSTRUCTIONS

APPLICANT must submit:

- Completed Application (Application will not be processed without all signatures)
- Signed copy of Lease Agreement
- **\$150.00 Application Fee** (non-refundable) made payable to: JENSEN BEACH COUNTRY CLUB
- **\$75 Background Check fee** (non-refundable) **per applicant/single adult** – Please make check payable to: JENSEN BEACH COUNTRY CLUB

AN ORIENTATION INTERVIEW WILL BE REQUIRED

All items must be submitted as an entire packet to:

Coastal Property Management
10 SE Central Parkway, #400
Stuart, FL 34994

Thank you in advance for your cooperation in following this process.

If you have any questions please call: Coastal Property Management – (772) 600-8900

Every effort will be made to expedite the notification process

LEASE APPLICATION

Date of Application _____ Property Address: _____

Date Lease Starts: _____ Date Lease Ends: _____

NAME(s) OF APPLICANT: _____ Email: _____

PRESENT ADDRESS: _____ City _____ State _____ Zip _____

Cell phone: () _____ Home phone () _____ Business Phone () _____

CO-APPLICANT: _____ Email: _____

PRESENT ADDRESS: _____ City _____ State _____ Zip _____

Cell phone: () _____ Home phone () _____ Business Phone () _____

VEHICLE(S) RESIDING AT RESIDENCE

MAKE _____ YEAR _____ MODEL _____

MAKE _____ YEAR _____ MODEL _____

NUMBER PEOPLE WHO WILL BE RESIDING AT THE HOME _____

EMERGENCY CONTACT INFORMATION

NAME _____ RELATIONSHIP _____ PHONE # _____

NAME _____ RELATIONSHIP _____ PHONE # _____

The undersigned hereby agrees to abide by the Articles of Incorporation, Declaration of Covenants and Restriction and By-Laws, all covenants, conditions, rules and regulations as set forth, as now or hereafter amended, and any additional covenants, conditions, rules and regulations as may be imposed from time to time by the Board of Directors or the members. Should we have a guest, we will ensure that they too are familiar with the Rules and Regulations.

The undersigned hereby agrees to abide with the above stated.

Tenant Signature

Co-Tenant Signature

Print Name

Print Name

Date Submitted: _____

JENSEN BEACH COUNTRY CLUB

LEASE APPROVAL APPLICATION

c/o Coastal Property Management

10 SE Central Parkway, #400

Stuart, FL 34994

Office: (772) 600-8900 Fax: (772) 266-9801

PROSPECTIVE TENANT ACKNOWLEDGEMENT

The undersigned being a new tenant applicant(s) of the following address:

I/We hereby authorize Jensen Beach Country Club and Coastal Property Management and its agents to conduct a background investigation of myself, as a prospective tenant in the Association and therefore authorize criminal histories of myself to be searched for the purpose of determining my suitability for residence in the community. I understand that the results of such investigation will be shared by the property manager with the Board of Directors of the Jensen Beach Country Club.

Dated: _____

_____ Date of Birth _____

(Signature)

_____ Social Security No. _____

(Print name)

Driver's License No. _____ State of Issuance _____

_____ Date of Birth _____

(Signature)

_____ Social Security No. _____

(Print name)

Driver's License No. _____ State of Issuance _____

Must be signed by all tenants. Use additional copy of this sheet if needed for additional tenants.

PLEASE ATTACH A CLEAR COPY OF ALL APPLICANTS CURRENT PHOTO ID