



## LAGOMAR VILLAGE AT FIDDLER'S CREEK

C/o Southwest Property Management  
1044 Castello Drive, Ste 206, Naples, FL 34103  
Ph: (239) 261-3440 / Fax: (239) 261-2013

### APPLICATION FOR APPROVAL TO LEASE

**Instructions:** Please submit application, lease agreement and fees at least **FIFTEEN (15)** days prior to tenant occupancy to Southwest Property Management.

Date: \_\_\_\_\_

#### SUBMIT WITH APPLICATION:

- Copy of signed Lease Agreement
- \$50 NON-REFUNDABLE application fee payable to LAGOMAR VILLAGE AT FIDDLER'S CREEK
- \$50 NON-REFUNDABLE processing fee payable to SOUTHWEST PROPERTY MANAGEMENT
- \$50 PER ADULT OCCUPANT for a NON-REFUNDABLE Criminal Background check payable to SOUTHWEST PROPERTY MANAGEMENT
- Copy of ID's

PLEASE TYPE OR PRINT LEGIBLY.

Current Owner \_\_\_\_\_

Property Address \_\_\_\_\_

Lease Start Date \_\_\_\_\_ Lease Ending Date \_\_\_\_\_ (90-day Minimum/12-month Maximum)

Name of Rental Agent/Agency Involved \_\_\_\_\_

Agent's Ph # \_\_\_\_\_ Agent's Email \_\_\_\_\_

First Applicant's Full Legal Name \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Present Address \_\_\_\_\_ Ph # \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Cell # \_\_\_\_\_

Email \_\_\_\_\_ Driver's License # \_\_\_\_\_ St \_\_\_\_\_

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 \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Present Address \_\_\_\_\_ Ph # \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Cell # \_\_\_\_\_

Email \_\_\_\_\_ Driver's License # \_\_\_\_\_ St \_\_\_\_\_

Business or Profession (even if retired) \_\_\_\_\_

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

US Citizen: Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, submit document copy of residency authorization or copy of passport)

The governing documents provide obligation of the homeowners that all homes are for single-family use. Please state the names, relationship and age of all other residents who will occupy the home.

**NAME**

**RELATIONSHIP**

**AGE**

_____	_____
_____	_____
_____	_____

Person to be notified in case of emergency \_\_\_\_\_

Address \_\_\_\_\_ Ph # \_\_\_\_\_

**VEHICLES: (No commercial vehicles allowed)**

Make/Model \_\_\_\_\_ Color \_\_\_\_\_ Yr \_\_\_\_\_ Tag # \_\_\_\_\_ St \_\_\_\_\_

Make/Model \_\_\_\_\_ Color \_\_\_\_\_ Yr \_\_\_\_\_ Tag # \_\_\_\_\_ St \_\_\_\_\_

I/WE specifically authorize the Board of Directors and American Property Management to institute an investigation of my background and agree that the information contained in this application may be used in such investigation, and that the Board of Directors and Officers of the Lagomar Village at Fiddler's Creek itself and APMS, shall be held harmless from any action or claim by me in connection herein or any investigation conducted.

I/We further understand and agree that Lagomar Village at Fiddler's Creek, in the event this rental application is approved, is authorized as the owner's agent with full authority and power to take whatever action may be necessary, including eviction, to prevent violation by lessee(s) and guests of the provisions contained in the above documents.

I/We attest that the information provided in this application is current, factual, and correct, and I understand that any misrepresentation in this application, or any negative information disclosed by the required background investigation of all occupants of the living unit, 18 years or older, may result in a decision by the Board of Directors to not approve this application.

I/We understand that tenants are not allowed to have pets.

I/We are in receipt of the Rules and Regulations of Lagomar Village at Fiddler's Creek and agree to abide by them.

By signing below, I/We have read, understood, and agree to all the statements above.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

**Action taken by Board of Directors:**

☐ Applicant Approved      ☐ Applicant Disapproved

\_\_\_\_\_  
Association President / Board Member/Manager

\_\_\_\_\_  
Date