

Par 5  
RENTAL APPLICANT  
ORIENTATION CHECKLIST

1. ATTACH COPY OF SIGNED RENTAL / LEASE AGREEMENT,  
at least 30 days prior to rental term.
2. ATTACH PHOTO COPY OF LICENSE FOR PROOF OF OVER  
55 OF AGE
3. ATTACH CHECK FOR \$150.00 PAYABLE TO:  
FAIRWAYS AT PAR 5.
4. APPLICANT MUST CALL PROPERTY MANAGEMENT  
OFFICE AT **239-455-4740** TO SET UP AN ORIENTATION  
MEETING.
5. REAL ESTATE AGENT OR OWNER IS TO OBTAIN  
APPROVAL FROM PROPERTY MANAGEMENT OFFICE.
6. ASSOCIATION HAS 30 DAYS TO APPROVE APPLICATIONS.

Please submit all documentation to:

Fairways at Par 5 Condo Association  
4140 27th Ct SW  
Naples, Fl 34116

# APPLICATION FOR PAR 5 RENTAL / LEASE

I/We \_\_\_\_\_ hereby apply for approval as a: NEW \_\_\_ RETURNING \_\_\_ Renter.

**Building # \_\_\_ Unit # \_\_\_ for a period Beginning \_\_\_\_\_ and Ending \_\_\_\_\_ (90 day minimum rental term)**

If owner has been granted an exception to Par 5 90 day minimum Rental Term Amendment, the following notation **MUST** be included on any Rental / Lease Agreement:

**PAR 5 RENTAL TERM EXCEPTION FOR (Building # - Unit #)**

NAME OF APPLICANT \_\_\_\_\_

Birth Date \_\_\_\_\_ Phone # \_\_\_\_\_

Email: \_\_\_\_\_

Name of Real Estate Agent or Owner: \_\_\_\_\_

Phone # \_\_\_\_\_ Email of Agent or Owner \_\_\_\_\_

Please list the name, relationship, and age of all other persons who will be occupying the condo during the rental period: **(One Person Must be 55 Years of Age or older. No one under 18 Years of age).**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age: \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age: \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Age: \_\_\_\_\_

Emergency Contact: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Vehicle Information **(only 2 Vehicles allowed per unit)** Must have decal (office provided) on Vehicle. (drivers side back window or bumper)

Make/Model: \_\_\_\_\_ Color \_\_\_\_\_ Tag/State: \_\_\_\_\_ Year: \_\_\_\_\_

Make/Model: \_\_\_\_\_ Color \_\_\_\_\_ Tag/State: \_\_\_\_\_ Year: \_\_\_\_\_

## APPLICATION FOR PAR 5 RENTAL / LEASE

Building # \_\_\_\_\_ Unit # \_\_\_\_\_

I/We understand that one person must be 55 or older to reside in the residence. No one under the age of 55 may reside in the residence without the qualifying 55+ person in residence at all times. Failure to comply constitutes justification for eviction. Yes/No Initial: \_\_\_\_\_

I/We Authorize the association to utilize the information contained within this application to determine the undersigned's suitability to reside in the community. Initial: \_\_\_\_\_

I/We are aware of and agree to abide by the Rules and Regulations of the Association and any and all other Rules and Regulations in effect within the terms of my(our) occupancy. Initial \_\_\_\_\_

I/We understand and agree that the association, 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 renter, lessee and guests. Initial \_\_\_\_\_

Have you ever been convicted of a felony or are you presently involved in any litigation? If Yes, please give details on back or separate sheet of paper. Yes/No Initial \_\_\_\_\_

I/We affirm that the information is factual and true and that any falsification or misrepresentation of the facts in this application shall be cause for automatic rejection and/or eviction. Initial \_\_\_\_\_

I/We agree to have our name and phone information in the personal Pars phone book: Yes/No Initial: \_\_\_\_\_

# APPLICATION FOR PAR 5 RENTAL / LEASE

Building # \_\_\_\_\_ Unit # \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **APPROVAL**

Driver License attached Yes/No \_\_\_\_\_

Orientation completed on: Date \_\_\_\_\_

Application is: approved \_\_\_\_\_ rejected \_\_\_\_\_

Approving signature: \_\_\_\_\_

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