

**Isles of Sarasota Homeowners Association, Inc.**  
**5901 Benevento Drive**  
**Sarasota, Fl. 34238**  
**Ph: 941-922-1298 Fax: 941-922-1501**

**APPLICATION TO LEASE**

TO: Isles of Sarasota Homeowners Association, Inc.:

I hereby apply for intent to lease the following unit in Isles of Sarasota H.O.A. :

---

I understand that that the documents governing the Association require that I lease the above unit for a period greater than or equal to four (4) months.

The lease period is as follows:

Lease commencement date: \_\_\_\_\_

Lease termination date: \_\_\_\_\_

FEES:

Application Fee of \$50.00 payable to Isles of Sarasota Homeowners Association, Inc.

To facilitate consideration of this application, I represent that the following information is factual and correct.

**Unit Owner  
Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Emergency  
Contact: \_\_\_\_\_

**Lessee  
Information:**

Name: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Emergency  
Contact: \_\_\_\_\_

**The Isles of Sarasota Homeowners Association, Inc.  
(Application to Lease continued:)**

The Homeowners Documents governing Isles of Sarasota require that all dwelling units be used for the sole purpose of single-family residences. Accordingly, please identify the following information regarding all other persons who will be occupying the unit with the lessee:

Name	Relationship to Lessee	Age

Lessee Automobile Information:

Make	Model	Year	Color	License Tag #	License State

Mailing address for notices connected with this application:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_

No portion of a Home (other than an entire Home) may be rented. No entire Home may be rented for a term of less than four (4) consecutive months. Not less than 10 days after the effective date of any lease, the Owner shall furnish to the Association a copy of the lease. **All leases shall provide that the Association shall have the right to terminate the lease upon default by the tenant in observing any of the provisions of this Declaration, the Articles, the Bylaws, applicable rules and regulations, or of any other agreement, document or instrument governing the Homes.** The Owner of a leased Home shall be jointly and severally liable with his or her tenant for compliance with the Isles of Sarasota Documents and to the Association to pay any claim for injury or damage to property caused by the negligence of the tenant. Every lease shall be subordinated to any lien filed by the Association whether before or after such lease was entered into."

I have read and agree to abide by the Declaration and By-Laws governing Isles of Sarasota H.O.A. as well as all Rules and Regulations of The Isles of Sarasota Homeowners Association.

_____ Lessee Signature	_____ Lessor Signature
_____ Lessee Name (Print)	_____ Lessor Name (Print)
_____ Date	_____ Date

**NOTE: Lease applications must be furnished to the Isles Property Manager 10 days before any lease begins.**