

# SAN LINO CONDOMINIUM ASSOCIATION, INC.

Managed by KEYS-CALDWELL, INC. 1162 Indian Hills Blvd., Venice, FL 34293  
Telephone: (941) 408-8293 Fax: (941) 408-8664 Email: [kcweb@keys-caldwell.com](mailto:kcweb@keys-caldwell.com)

## RENTAL/LEASE APPLICATION

Each application must be in Print/Legible and completed in its entirety, signed by the Owner(s) and the Applicant(s). A \$100.00 Non-Refundable fee, payable to San Lino Condominium must accompany each application submitted for approval. An incomplete application will not be considered. Return Application and Fee to Keys-Caldwell, Inc., 1162 Indian Hills Blvd., Venice, FL 34293. A copy of the lease agreement must be attached to the application.

San Lino Address & Unit #: \_\_\_\_\_

Term of Lease (Full Dates): From \_\_\_\_\_ To : \_\_\_\_\_ ( Minimum Rental 90 Days)

Owner(s) Name (Print): \_\_\_\_\_ Owner(s) Email Address: \_\_\_\_\_

Owner(s) Address (Print): \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone / Cell #: \_\_\_\_\_ Phone / Cell #: \_\_\_\_\_

Applicant(s) Name Print: \_\_\_\_\_ Email Address: \_\_\_\_\_

Applicant(s) Name Print: \_\_\_\_\_ Email Address: \_\_\_\_\_

Present Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_ Employer (Spouse): \_\_\_\_\_ Phone #: \_\_\_\_\_

**NOTE: RENTERS ARE NOT PERMITTED TO HAVE PETS.**

Renter's Vehicle Information:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ State: \_\_\_\_\_ License #: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ State: \_\_\_\_\_ License #: \_\_\_\_\_

**NOTE: IF YOU HAVE TWO (2) VEHICLES, ONE MUST BE PARKED IN THE GARAGE.**

Emergency Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

Names of additional persons to Occupy Premises (give ages if under 18):  
\_\_\_\_\_  
\_\_\_\_\_

### REQUIRED SIGNATURES

By my signature, I/we acknowledge that I/we have reviewed the Rules and Regulations of San Lino Condominium Assoc., Inc., and agree to abide by them. Furthermore, I/we assure that all unit occupants and guests also abide by them.

Applicant(s) Signature: \_\_\_\_\_ Applicant(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By my/our signature as the Unit Owner(s), I/we agree to the following conditions:

1. During the occupancy period, the Owner(s) will relinquish the right to use the facilities of San Lino
2. The Owner(s) agree to indemnify and hold harmless the Association from any and all damages, including attorney's fees and court cost, caused by occupants and guests of the Owner(s) premises with the express or implied knowledge or consent of the Unit owner(s) or arising out of or in connection with any failure of the Unit Owner(s) to maintain any area or portion of the Unit with the Unit Owner(s) responsibility pursuant to the Condominium Documents or Florida law.
3. The approval of the application by the Board of Directors shall not be considered a waiver of any right the Association may have to enforce the rules, regulations and restrictive covenants contained in the condominium Documents or Florida law.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### San Lino Condominium Association's Review

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_

Board of Director's Representative: \_\_\_\_\_

Reason(s) for Disapproval: \_\_\_\_\_