

Wedgewood Lake Condominium Association, Inc.

c/o

Miller Management Services, Inc.

2848 Proctor Road

Sarasota FL 34231

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C O N F I D E N T I A L

**APPLICATION FOR APPROVAL**

**LEASE, OCCUPATION, SALE OR TRANSFER**

In accordance with Article 16.2 of the Association's Declaration of Condominium, this form must be completed in its entirety and delivered to the Association, along with a \$100.00 non-refundable application fee, not less than 30 days prior to any unit owner's acceptance of an offer to purchase, lease or transfer ownership or allow occupation when an owner is not present. The Association will not approve or authorize possession or occupation of any unit until after the Board of Directors timely receives this application and completes their investigation and returns an approved copy of this form, signed by a Director or Officer, to the unit owner (or his agent as may be designated in writing by the owner).

In the event an applicant provides false, misleading or incomplete information to complete this form, the Board shall reject the application and may thereafter take legal actions for damages or for injunctive relief, or both, in addition to the remedies provided by statute and common law. In any such legal or equitable action or proceeding, the prevailing party shall be entitled to recover his costs and expenses, including reasonable attorneys' fees to be determined by the Court, including Appellate proceedings.

In the event an Application is disapproved, the unit shall not be leased, subleased, occupied, sold or transferred and possession of the unit shall not be authorized.

In accordance with Articles 16 and 17 of the Wedgewood Lakes Declaration of Condominium, I (we) the undersigned Owner(s) of Unit No. \_\_\_\_\_ located at \_\_\_\_\_ (if more than one owner, all owners must sign) request approval to: (check one)

1. \_\_\_\_\_ Lease the Unit from \_\_\_\_\_ to \_\_\_\_\_
2. \_\_\_\_\_ Allow occupation of the Unit in my/our absence from \_\_\_\_\_ to \_\_\_\_\_
3. \_\_\_\_\_ Sell the Unit with an anticipated closing date of \_\_\_\_\_
4. \_\_\_\_\_ Transfer the Unit on \_\_\_\_\_

**OCCUPANCY INFORMATION**

1. Name(s) of proposed lessee(s), occupant(s), buyer(s) or transferee(s) and their relationship to each other. (If there is a minor, please provide age):

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2. Address of all proposed lessee(s), occupant(s), buyer(s) or transferee(s) (list in order named above):

(full mailing address)	City	State	Zip code
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(full mailing address)	City	State	Zip code
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(full mailing address)	City	State	Zip code
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(full mailing address)	City	State	Zip code
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(full mailing address)	City	State	Zip code
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(full mailing address)	City	State	Zip code
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3. List all passenger vehicles to be parked in Wedgwood Lakes parking areas:

Vehicle Make and Model: \_\_\_\_\_

Vehicle Make and Model: \_\_\_\_\_

Vehicle Make and Model: \_\_\_\_\_

If additional parking space is required, describe type of vehicle and number of additional spaces required (Parking of commercial vehicles is prohibited in any Wedgewood Lakes parking areas):

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4. List and describe the breed of any pet intended to occupy the unit:

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NOTE: Only one (1) cat or small dog not exceeding 15 inches in height at the shoulder is allowed and such pet must comply with all applicable Rules. **Renters are not permitted to maintain pets within the Unit or upon any portion of the condominium property.**

5. Present employer or occupation: \_\_\_\_\_

Position: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

6. Principal Bank references:

Name of Bank	Address	Contact person	Phone Number
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7. Credit references (two required):

Name	Address	Contact person	Phone number
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Name	Address	Contact person	Phone number
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8. Personal references (two required):

Name	Address	Phone number
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Name	Address	Phone number
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9. Rental History (Past two residences required):

Name of Landlord	Address	Phone number
Lease period		Amount of rent/month
Name of Landlord	Address	Phone number
Lease period		Amount of rent/month

All applicants agree to abide by all the terms and conditions of the Association's governing documents (Declaration of Condominium, Articles of Incorporation, Bylaws and Rules and Regulations).

This Application must be submitted to the Association in duplicate and both copies must be signed by all record title owners.

Following action by the Directors, this form will be returned to the owner(s) at the owner's last address of record. However, if the owner(s) desire to have the application returned to another party or address, he/she/they must indicate this in writing in the area immediately above the owners(s) signature.

Following action on this application, please return it to:

Full Name and address including zip code.

I/we have received, read and agree to abide by the Rules, Regulations and other governing documents for Wedgewood Lake Condominium Association. In addition, I/we agree to allow regular interior pest control applications.

Signature of Owner(s) \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_

Signature(s) of Lessee(s),  
Occupant(s), Purchaser(s),  
Or Transferee(s) \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Owner(s), Lessee(s), Occupant(s), Purchaser(s), or Transferee(s) are notified that the Rules and Regulations of Wedgewood Lakes Condominium Association include these provisions:

***Units may be used only for single family resident purposes.***

***Units may be leased only as an entire unit and for a period of not less than 30 days and only 4 time(s) per calendar year.***

***The Board or its designated agent shall be allowed to enter any unit at any reasonable time to determine compliance with the Condominium Act, the current Declaration of Condominium, Bylaws and the Rules and Regulations and to act to correct emergency situations.***

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The Board of Directors of Wedgewood Lake Condominium Association, Inc.

\_\_\_\_\_ approve this application

\_\_\_\_\_ reject this application

Dated: \_\_\_\_\_

FOR THE BOARD OF DIRECTORS

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\_\_\_\_\_

SAR\_DB: 175542\_1