

Jasmine Ct.

RENTAL APPLICATION

Sandcastle Community Mgmt.
9150 Galleria Ct., Suite 201
NAPLES, FL 34109
239-596-7200

Name of Unit Owner: _____

Jasmine Ct. Address : _____ Hidden Lake Drive # _____

Home Phone : _____ Cell Phone _____ E-Mail _____
@ _____

- A signed copy of the Rental/Lease Application must be submitted 30 days prior to the start of the Rental date.
- A non-refundable, non-transferable check for \$150.00 made payable to Jasmine Ct Association is to be submitted with this application drawn on the owner's bank account.
- **NOTE: Unit rentals/leases are restricted to once every 28 days**
- **Only Owners are permitted pets**
- All Annuals including annual lease renewals are required to submit a Rental Application with a copy of the new lease each time the lease is to be renewed.
- Sub-rental of the unit or carport is NOT permitted.

Name(s) of Renter/Lessee: _____

Address: _____

Cell Phone Number: _____

Driver's License Number: _____ State _____

Arrival Date: ___/___/___ Departure Date: ___/___/___

Children: Yes ___ No ___ (Note: Total occupancy may not exceed 2 persons/bedroom)

In the event of emergency, Notify _____ Phone _____

I have received, read and agree to abide by the Rules and Regulations of Jasmine Ct. Association and understand the consequences of non-compliance up to and including possible eviction.

Renter/Lessee Applicant Signature: _____ Date: : ___/___/___

Renter/Lessee Co-Applicant Signature: _____ Date: : ___/___/___

Owner's Signature _____ Date : ___/___/___

Mail the completed application along with your Lease Agreement and \$150.00 check to the above address. Incomplete applications will be rejected!