Aldea Mar Condominium Association, Inc
c/o Sunstate Association Management, Inc.
P.O. Box 18809, Sarasota, FL 34276
Office (941) 870-4920 Fax (941) 870-9652
Email: allapplications@sunstatemanagement.com

Leasing Application

Return this application to Sunstate Association Management Group, Inc., PO Box 18809 Sarasota, FL. 34276. Must include a copy of the lease agreement and a Non-Refundable Application fee of $150.00 made payable to Sunstate Association Management Group, Inc.

Lease ___ Dates ____ to ____

Present Owner: _____

Owner email: _____

Unit Address: _____

Full-Time Residence? **YES** ☐ **NO** ☐ **Realtor / Lease Manager Name and Phone:** _____

Applicant Information

Full Name: _____ Date of Birth: _____
Last *First* *M.I.*

Phone: _____ Email _____

Full Name: _____ Date of Birth: _____
Last *First* *M.I.*

Phone: _____ Email _____

Present Address: _____
Street Address City, State, Zip

Previous Address: _____
Street Address City, State, Zip

Other Occupants: _____

Name and Date of Birth of all other occupants under 18 years of age. (If over 18 use additional application.)

Vehicle 1: _____ _____
Make *Model* *State* License Plate #

Vehicle 2: _____ _____
Make *Model* *State* License Plate #

List any additional vehicles on a separate sheet.

IF THIS APPLICATION IS INCOMPLETE, IT WILL BE RETURNED TO APPROPRIATE PERSON OR AGENT
PLEASE USE AN ADDITIONAL APPLICATION FOR MORE THAN TWO RESIDENTS OVER THE AGE OF 18

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Authorization of Release of Information

Applicant(s) represent that all the information and statements for purchase or lease are true and complete. I am aware that any falsification or misrepresentation of the facts in this application will result in immediate rejection of this application.

Signature: _____ Date: _____

Signature: _____ Date: _____

Disclaimer and Signature

The undersigned has received a copy of the Association Documents: By-Laws and the Rules and Regulations of Aldea Mar Condominium Association, Inc. and agree to abide by them.

Signature: _____ Date: _____

Signature: _____ Date: _____

Action By Board of Directors

	YES	NO
Application Approved	☐	☐

Board
Signature: _____ Date: _____

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