

BELLA COSTA, INC.

LEASE APPLICATION

BUILDING: _____ UNIT #: _____

Per the Declaration of Condominium, "No owner shall rent his apartment without first obtaining the approval of the Board of Directors. Rentals will be approved for a minimum period of three (3) months." Per Rules & Regulations, "Rentals are limited to the continuing occupancy of not more than four persons per unit." Note: Bella Costa is a no-dog community.

OWNER

Owner acknowledges responsibility for any damages to Bella Costa property caused by the renter.

Owner Name: _____ Email: _____

Owner's Signature: _____ Date: _____

RENTER

Renter Name: _____ Repeat Tenant? ____ Yes ____ No

Home Address: _____

Phone: _____ Alt. Phone: _____

Email Address: _____

(email addresses kept private; entering email address allows contact by association for eBlast news and business)

Names of Occupants (Maximum of 4):

Date of Occupancy: _____ Date of Departure: _____

Vehicle Year: _____ Make/Model: _____ Color: _____

License State: _____ License Plate #: _____

Emergency Contact Name: _____ Phone: _____

Renter initials:

____ I/We do not have any pets. (Note: Bella Costa is a no-dog community)

____ I/We have received a copy of the Rules & Regulations document

____ I/We agree to abide by the governing documents and Rules and Regulations of Bella Costa, Inc.

Renter(s) Signature: _____ Date: _____

- **A non-refundable fee of \$150.00, payable to Bella Costa, Inc., must accompany this two-page application.** (There is no fee or background investigation for repeat tenants. Repeat tenants return the first page of application.)
- **Please put the completed two-page application, photo ID and check in an envelope and drop Bella Costa Clubhouse mail slot or mail to Bella Costa, Inc, 200 Santa Maria St., Venice, FL 34285. To expedite processing, in addition to mailing the application, also email a copy of the two-page application to bellacostaemail@gmail.com.**

BOARD USE ONLY:

_____ New Applicant Approved _____ Repeat Tenant Approved _____ Application Denied

Board Member Name: _____ Board Position: _____

Board Member Signature: _____ Date: _____

BELLA COSTA, INC.**BEACON BACKGROUND SCREENING SERVICES, LLC
TENANT/BUYER SCREENING APPLICATION
3146****APPLICANT: Please print neatly. Information that is not legible will delay the process of this application.**

Full Legal Name:	Maiden/Alias:		
Current Street Address:	City:	State:	Zip:
Phone:			
Driver's License Number:	State of ID:		
Social Security Number:	Date of Birth:		
IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS PLEASE EXPLAIN:			
Have you ever been evicted?			
Have you filed bankruptcy in the last 7 years?			
Have you ever been arrested or convicted of a misdemeanor or felony?			

CO-APPLICANT: if living at same address as applicant (use a separate form if living at a different address)

Full Legal Name:	Maiden/Alias:
Driver's License Number:	State of ID:
Social Security Number:	Date of Birth:
IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS PLEASE EXPLAIN:	
Have you ever been evicted?	
Have you filed bankruptcy in the last 7 years?	
Have you ever been arrested or convicted of a misdemeanor or felony?	

PREVIOUS ADDRESS IF LESS THAN 5 YEARS AT ABOVE ADDRESS:

Street:	City:	State:	Zip:
Reason for move:			

I understand that an investigative background inquiry is to be done, including but not limited to identity and prior address(es) verification, and criminal history. I understand that for the purpose of this inquiry, various sources will be contacted to provide information, including but not limited to various federal, state, municipal, corporate and private sources which may maintain records concerning my past activities relating to possible criminal conduct civil court litigation, and driving history as well as other information. I authorize without reservation, any company, agency, party or other source contacted to furnish the above information.

Applicant Signature:

Date:

Spouse or Co-Signer Signature:

Date: