

RENTAL APPLICATION
PATIOS I OF ST. ANDREWS ASSOCIATION, INC.

PRIOR TO OCCUPANCY RETURN APPLICATION TO:

CAPRI PROPERTY MANAGEMENT, INC.
425 COMMERCIAL CT. K, VENICE FL 34292

PHONE: (941) 412-0449 FAX: (941) 412-0720 EMAIL: angela@cpmi.us

THREE MONTH MINIMUM

The following information is pertaining to the RENTAL of _____

Rental Period: From _____ to _____

Owner's Name: _____

Renter's Name: _____

Owner's Telephone _____ Unit's Telephone _____

Renter's Telephone _____ Email: _____

Persons to reside in unit (include ages of all occupants under 18)

Vehicle Make: _____ Year: _____ Model: _____ Tag: _____

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Emergency Contact _____ Phone: _____

Address _____

Renter understands and agrees to observe all rules, regulations and restrictions contained in the Association "Use Restrictions" as well as any other rules that may be established by the Board of Directors.

Renter Signature _____ Date: _____

Agent: _____ Phone: _____

Owner is responsible for ensuring that owners' tenants obey all the governing documents of the Association.

BOARD ACTION

Approved: _____ Rejected: _____

Signature: _____ Date: _____