



**REQUEST FOR ASSOCIATION APPROVAL FOR LEASE**

PARKSIDE OF ONE BAYSHORE CONDOMINIUM ASSOCIATION, INC. requires written approval from the Association for any sale, transfer, or lease of a residence. The following information must be provided and submitted to the Association **7 days prior** to issuance of approval. The Association has thirty (30) days to review all **completed** applications. Applications must be complete with all required attachments. **Incomplete applications will be returned to owner/applicant/realtor/agent. Please note that the Association does NOT perform a criminal or credit screening on the applicant. It is the Unit owner's responsibility to perform all screenings prior to leasing their unit.**

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**OWNERS INFORMATION**

Unit #: \_\_\_\_\_ Parking Spaces # \_\_\_\_\_ Storage Space # \_\_\_\_\_

Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Ph: # ( ) \_\_\_\_\_

**APPLICANT INFORMATION**

LESSEE(S): \_\_\_\_\_  
(include names of all persons appearing on lease)

LEASE TERM: FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
(MINIMUM LEASE PERIOD IS ONE (1) YEAR)

**PETS: LESSEES ARE NOT ALLOWED PETS – NO EXCEPTIONS (This includes guests of the lessees.)**

LESSEE(S) CURRENT ADDRESS: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Ph: # ( ) \_\_\_\_\_

Length of time at current address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rent: \_\_\_\_\_ Own: \_\_\_\_\_

Lease Term: From: \_\_\_\_\_ To: \_\_\_\_\_

Name of Owner/Rental Agent/Realtor/Apt. Complex: \_\_\_\_\_

Contact: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Ph:# ( ) \_\_\_\_\_

Spouse(s) place of employment (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_ Ph:# ( ) \_\_\_\_\_

The Unit Owner must provide the Lessee(s) with garage gate operator remote controls. It is the Unit Owner's responsibility to provide Lessee(s) with the door access devices provided for their unit. Should Lessee(s) not receive access devices from the Unit Owner, the Owner may purchase them from the Association at a cost of \$100 per door access device. The gate openers are \$50.00. All door access devices and gate openers will be deactivated at the end of the lease if not returned to the Association office or Unit Owner.

Vehicle(s) Description

1) Make/Model/Yr: \_\_\_\_\_

Color: \_\_\_\_\_ Tag#: \_\_\_\_\_

2) Make/Model/Yr: \_\_\_\_\_

Color: \_\_\_\_\_ Tag#: \_\_\_\_\_

Personal References – Include one in local are if possible

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Ph#:( ) \_\_\_\_\_

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1. **A processing fee of \$100.00 and a \$500 security deposit must accompany this application -**  
Two separate checks must be made payable to Parkside of One Bayshore Condominium Assoc., Inc.
2. The Association has up to 30 days from the date an approval request and required attachments are received to process this application.
3. Unit Owner must be an Association member in good standing and current on payment of Assessments.
4. Minimum lease period is one (1) year.
5. No subleasing is permitted.
6. Unit Owner forfeits all use rights to the association property and those common elements otherwise readily available for use generally by unit owners, unless such rights are waived in writing by the tenant. However, Unit Owner maintains all rights and privileges as a member of the association regarding association property and business matters.
7. Lessee must sign this approval request form as a condition of approval. Unit Owner must provide their Lessee with a copy of applicable use restrictions and regulations (Rules & Regulations) in affect for Parkside at One Bayshore.

8. A **fully executed and signed** copy of the Lease Agreement, Residential Lease Addendum, Early Termination Form and Acknowledgment of Association Governing Documents Form must accompany this application. Failure to submit all signed forms will delay the application authorization. Tenants will not be permitted to move in without application authorization.

**ACKNOWLEDGMENT OF RULES & REGULATIONS**  
**PARKSIDE OF ONE BAYSHORE CONDOMINIUM ASSOCIATION, INC.**

I (We) have received, read, understand and agree to abide by all use restrictions and rules & regulations in affect for Parkside of One Bayshore Condominium Association, Inc. I (We) further certify that the information provided in this request for Association Approval is complete and correct to the best of my (our) knowledge.

Lessee(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Lessee(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

While the Lessee(s) acknowledges compliance with the use restrictions & regulations of Parkside of One Bayshore Condominium Association, Inc. by themselves and their guest, the Unit Owner will ultimately be held responsible for violations of these regulations including, but not limited to, violation fines. Unit Owner is responsible to provide the Association with copies of any lease renewals or a one-time three month extension prior to the effective date of such renewals or extensions. **Unit Owner acknowledges that he/she is aware that in no event shall the unit be leased more than once during the one year period beginning on the effective date of an approved lease and ending upon the expiration of said lease.**

**Owner Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

Return this completed form to:

Parkside of One Bayshore Condominium Association, Inc.  
275 Bayshore Blvd.  
Tampa, Fl 33606  
On-Site Management Office.

Do Not Write Below This Line

ASSOCIATION APPROVAL

This Application has been **Approved** \_\_\_\_\_

This Application has been Disapproved \_\_\_\_\_

PARKSIDE OF ONE BAYSHORE CONDOMINIUM ASSOCIATION, INC.

By: \_\_\_\_\_ Date \_\_\_\_\_

Title: \_\_\_\_\_