

West Passage Association, Inc.

APPLICATION FOR LEASE

Note: This application must be accompanied by a processing fee of \$50.00
Please make check payable to: West Passage Association, Inc. and
send to Elliott Merrill Community Management, 835 20th Place, Vero
Beach, FL 32960.

Apartment No. _____ Owner Name _____

Agent for Owner _____

Lease Term: From: _____ To: _____

Applicant Name: _____

Spouse (Co-Applicant) Name: _____

Applicant Address: _____

Applicant Phone: _____ Ages of children under 21: _____

Names of those who will occupy apartment: _____

Will there be any musical instruments on the premises? _____

Applicant's Occupation: _____

Business Address: _____

Colleges Attended and Degrees Awarded: _____

Applicant: _____

Spouse: _____

Applicant's Club Memberships: _____

Spouse's Club Memberships: _____

Personal References (local residents, if possible):

1. Name: _____

Address: _____ Telephone: _____

2. Name: _____

Address: _____ Telephone: _____

Business References

1. Name:

Address: _____ Telephone: _____

2. Name:

Address: _____ Telephone: _____

Have you rented at The Moorings before? ____ If so, please give name of Condominium Association and term of rental _____

We hereby agree to abide by the rules and regulations of West Passage Association during our occupancy of the apartment. Further, we promise that:

1. My spouse or I will be in residence whenever the premises are occupied;
2. No children under the age of 14 will reside in the apartment;
3. No pets will be kept within the apartment or elsewhere on condominium property;
4. All garbage and trash will be bagged and/or recycled and deposited solely in building chutes or directly into recycling bins supplied by the Association;

Date of Application

Applicant Signature

Spouse Signature

Approved for the Association:

By: _____

Date