GRAND ISLE OF NORTH HUTCHINSON ISLAND

APPLICATION FOR APPROVAL

A **$100** processing fee and for **RENTALS ONLY** a separate security deposit to the Association in the amount of **$1,000** must be presented with this application. Please make checks payable to 'Grand Isle of North Hutchinson Island Condominium Association, Inc. *A copy of the executed sales and lease agreement must be submitted with this application.*

Sale: _____ **Lease** _____ **Unit #** _____ **Garage #** _____

Under building parking space # (if applicable) _____

Present Owner(s): _____

Address: _____

_____

Name of Applicant: _____

DOB: _____ **SSN:** _____

Phone #: _____

Email: _____

Name of Spouse: _____

DOB: _____ **SSN:** _____

Phone #: _____

Email: _____

Name of Children to Reside in Unit: _____ **Age:** _____

Name of Children to Reside in Unit: _____ **Age:** _____

Present Residence Address: _____

_____

Present Occupation: _____ **Years Employed:** _____

Name & Address of Firm _____

Term of Lease (if applicable) _____ **To:** _____

Lease Restrictions: Minimum period is 3 months. Only two tenancies per year are permitted. All renewals must be re-applied.

Pets: **Dog** _____   **Cat:** _____   **None:** _____
            Breed: _____   **Weight:** _____

Pet Restrictions: Limited to 1 dog less that 35lbs at maturity or one cat less than 20lbs at maturity.

References: include one local banking reference.

1. _____

2. _____

3. _____

Please describe all motor vehicles owned by applicant to be parked on Association property*:

Year: _____ **Make:** _____ **Model:** _____ **Tag# / State** _____

Year: _____ **Make:** _____ **Model:** _____ **Tag# / State** _____

Grand Isle
- This is a residential community and commercial use of any kind is not permitted and transient occupancy is not allowed.
- Trucks and motorcycles are not permitted to be parked on Association property.
- Grand Isle is a No Smoking Property.

YOU ARE HEREBY AUTHORIZED TO REQUEST A CREDIT REPORT/BACKGROUND CHECK AND TO CONTACT ANY OF THE ABOVE REFERENCES FOR THE PURPOSE OF ACTION UPON THIS APPLICATION.

I HAVE RECEIVED A COPY OF THE GRAND ISLE OF NORTH HUTCHINSON ISLAND RULES AND REGULATIONS, AND AMENDMENTS. I HAVE READ AND WILL COMPLY WITH THE SAME.

Date: _____   **Signature of Applicant:** _____

Date: _____   **Signature of Applicant:** _____

Submit the entire package to:

Grand Isle of North Hutchinson Island
c/o Elliott Merrill Community Management
835 20th Place, Vero Beach, FL 32960
cheric@elliottmerrill.com

ASSOCIATION USE ONLY

APPROVED BY GRAND ISLE OF NORTH HUTCHINSON ISLAND CONDOMINIUM:

Date Received: _____

Approved By: _____   **Approved By:** _____

Print Name: _____   **Print Name:** _____