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.

Apa	irtment NoOwner Name	
Age	ent for Owner	
Lea	se Term: From:	То:
App	licant Name:	
	ouse (Co-Applicant) Name:	
App	licant Address:	
	licant Phone:Age	
Nar	nes of those who will occupy apartment:	
Will	there be any musical instruments on the premise	es?
App	licant's Occupation:	
Bus	iness Address:	
Col	eges Attended and Degrees Awarded:	
App	licant:	
	ouse:	
App	licant's Club Memberships:	
Spo	ouse's Club Memberships:	
Per	sonal References (local residents, if possible):	
1.	Name:	
	Address:	
2.	Name:	
	Address:	Telephone:

West Passage Association, Inc. Application for Lease of Apartment Page 2

Bus	iness 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			
	hereby agree to abide by the rules and regul occupancy of the apartment. Further, we pro		
2.	. No pets will be kept within the apartment or elsewhere on condominium property;		
Date of Application		Applicant Signature	
		Spouse Signature	
App	roved for the Association:		
Ву:		 Date	
		Dato	