



## PROPERTY OWNERS ASSOCIATION, INC.

1856 SW Newport Isles Blvd. ~ Port Saint Lucie, FL 34953 ~ Phone: (772) 345-1642 ~ Fax: (772) 345-1662

### Instructions for Lease Application

Incomplete or illegible applications will not be processed.

Please allow up to 7 days from receipt of complete application for processing.

### LANDLORD MUST PROVIDE THE ITEMS BELOW TO THE POA PRIOR TO LEASE APPROVAL

1. Updated owner contact information.
2. A copy of the lease the tenant will be signing. Said lease must comply with all terms of the governing documents; both tenant and landlord are jointly and severally liable to the association for any fines levied or damages caused by tenant to any common areas.
3. Completed application form (copy attached) from tenant.
4. A nonrefundable application fee in the amount of \$125.00 made payable to **Newport Isles Property Owners Association. This must be a separate check.**
5. Names of occupants living in the unit who are 18 years old and older.
6. A signed authorization form (copy attached) for each background check together with a check made payable to **Newport Isles** in the amount of **\$19.00 for each person named on the lease and \$10.00 for each occupant age 18 or older.** This amount is nonrefundable. **Note:** A criminal background check will be done on all occupants in the leased unit who are 18 years and older. A credit report will be done on the lessee(s).
7. Association Security Deposit in the amount of \$500.00 made payable to **Newport Isles Property Owners Association. This must be a separate check.**
8. Contact information list (copy attached) of the tenant's former landlords for the last 3 years.
9. Emergency contact information (copy attached) from the tenant.
10. A statement (copy attached) signed by both landlord and tenant(s) stating the Landlord has provided the Tenant with the items listed below.
  - a. The Landlord has provided the Tenant with a copy of the Declaration of Covenants, Restrictions and Easements for Newport Isles, the Bylaws for Newport Isles, the Articles of Incorporation for Newport Isles, Community Standards, Rules & Regulations for Newport Isles and any Amendments to the aforementioned documents; and
  - b. The Landlord has provided the Tenant with the access control devices for the gates and the key(s) to the clubhouse. If Landlord has not provided the Tenant with access control devices for the gates and key(s) to the clubhouse, Tenant acknowledges that he/she will be charged for these items by the Association.

### TENANT(S) OBLIGATIONS

1. Tenant(s) must attend the Welcome Committee meeting **PRIOR** to moving into Newport Isles.
2. **READ** all governing documents and **ABIDE** by all rules and regulations set forth in each of the documents.

### UNIT OWNER(S) MUST BE CURRENT WITH ALL ASSESSMENT AND FINE PAYMENTS TO THE ASSOCIATION AT THE TIME OF SUCH RENTAL APPLICATION APPROVAL.

~ Thank you ~

Application for Approval of Lease

Recorded Property Owner Name: \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_

Property Owner Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

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

Anticipated Move-In Date \_\_\_\_\_

Lease Dates \_\_\_\_\_ through \_\_\_\_\_

<b>Applicant Information</b> Applicant Name _____ Work Phone _____ Cellular Phone _____ E-mail address _____	Applicant Name _____ Work Phone _____ Cellular Phone _____ E-mail address _____
<b>List of Additional Occupants</b> 1. _____ Age: _____ Relationship to Applicant: _____ 2. _____ Age: _____ Relationship to Applicant: _____ 3. _____ Age: _____ Relationship to Applicant: _____	4. _____ Age: _____ Relationship to Applicant: _____ 5. _____ Age: _____ Relationship to Applicant: _____ 6. _____ Age: _____ Relationship to Applicant: _____
<b>Vehicle Information</b> Vehicle #1 _____ Year _____ Make _____ Model _____ Tag # _____ State _____	Vehicle #2 _____ Year _____ Make _____ Model _____ Tag # _____ State _____
Vehicle #3 _____ Year _____ Make _____ Model _____ Tag # _____ State _____	Vehicle #4 _____ Year _____ Make _____ Model _____ Tag # _____ State _____
<b>Pet Information</b> #1 Pet Name _____ Breed (List all if mixed) _____ Current Weight _____ Age _____ Description of pet _____ _____	#2 Pet Name _____ Breed (List all if mixed) _____ Current Weight _____ Age _____ Description of pet _____ _____
<b>*** Must Include Picture of Pet(s)***</b>	<b>*** Pit Bulls Are Not Permitted***</b>

<b>List Former Landlords from the last 3 years:</b>	
1. Landlord Name: _____ 2. Phone Number: _____ 3. Time at Residence: _____	1. Landlord Name: _____ 2. Phone Number: _____ 3. Time at Residence: _____
1. Landlord Name: _____ 2. Phone Number: _____ 3. Time at Residence: _____	1. Landlord Name: _____ 2. Phone Number: _____ 3. Time at Residence: _____
1. Landlord Name: _____ 2. Phone Number: _____ 3. Time at Residence: _____	1. Landlord Name: _____ 2. Phone Number: _____ 3. Time at Residence: _____
<b>Emergency Contact Information:</b>	
1. Name: _____ 2. Address: _____ _____ 3. Phone Number: _____ 4. Relationship: _____	1. Name: _____ 2. Address: _____ _____ 3. Phone Number: _____ 4. Relationship: _____

The Landlord has provided the Tenant with a copy of the Declaration of Covenants, Restrictions and Easements for Newport Isles, the Bylaws for Newport Isles, the Articles of Incorporation for Newport Isles, Community Standards, Rules & Regulations for Newport Isles and any Amendments to the aforementioned documents; and The Landlord has provided the Tenant with the access control devices for the gates and the key(s) to the clubhouse. If Landlord has not provided the Tenant with access control devices for the gates and key(s) to the clubhouse, Tenant acknowledges that he/she will be charged for these items by the Association.

1. There shall be no more than two persons per bedroom in any leased home.
2. The number of motor vehicles permitted at each property shall be limited to the number which can be parked in accordance with Port Saint Lucie code and Association rules. No parking shall be allowed on the street, in grassy areas or on the sidewalks within Newport Isles. Violators are subject to towing at the vehicle-owners' expense).

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Owner Name Printed

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Applicant Name Printed

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Applicant Name Printed



**NOTICE, AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORT**

I, the undersigned consumer, do hereby authorize Newport Isles Property Owners Association by and through its independent contractor, **Scott Roberts and Associates**, to procure a consumer report and/or investigative consumer report on me. These reports may include, but are not limited to, information as to my character, general reputation and personal characteristics, discerned through my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; any other public record.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to Newport Isles Property Owners Association by and through **Scott Roberts and Associates**, including, but not limited to any and all courts, public agencies, law enforcement agencies and credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources. I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report of which I am the subject upon my written request to **Scott Roberts and Associates** at 2393 S. Congress Ave; West Palm Beach FL, 33406, (888)-605-4265(O) (888)605-4305 (F) if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C § 1681 et. seq.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**IDENTIFYING INFORMATION FOR CONSUMER REPORTING AGENCY**

**Print Name:** \_\_\_\_\_

**Other Names Used (alias, maiden, nickname)** \_\_\_\_\_

**Current**

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

Street/P.O. Box	City	State	Zip Code	County	Dates
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**Former**

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

Street/P.O. Box	City	State	Zip Code	County	Dates
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**Former**

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

Street/P.O. Box	City	State	Zip Code	County	Dates
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**Social Security Number:** \_\_\_\_\_ **Daytime Telephone Number:** \_\_\_\_\_

**Driver's License#:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**Have you ever been convicted of a crime? \_\_\_yes or \_\_\_No (if yes please provide details)**

**Details:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**THIS FORM MUST BE COMPLETED FOR EACH PERSON LISTED ON THE LEASE AS WELL AS EACH OCCUPANT AGE 18 OR OLDER**

**NEWPORT ISLES PROPERTY OWNERS ASSOCIATION, INC.**  
**Resident Access Information Form**

**If you are a new resident you must include either your warranty deed or lease agreement with this form for the information to be processed.**

This form must be fully completed in legible print.

Owner \_\_\_\_\_ Tenant \_\_\_\_\_ Identification # to be Assigned by Office Personnel: \_\_\_\_\_

Recorded Property Owner Name: \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Newport Isles Property Address: \_\_\_\_\_ Lot#: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ (This will be the number used for contacting resident for guest authorization)

**Occupant 1** Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Occupant 2** Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Additional Listing of Occupants living at this address:**

1: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

2: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

3: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

4: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

5: Name: \_\_\_\_\_ Owner / Minor / Tenant / Occupant

**GATEHOUSE PHONE NUMBER (772) 345-1272**  
**This is the number you need to call for guest authorization**  
NEWPORT ISLES PROPERTY OWNERS ASSOCIATION, INC.

**NEWPORT ISLES PROPERTY OWNERS ASSOCIATION, INC.**  
**Resident Access Information Form**

**Permanent Visitors**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_

**Permanent Service Personnel**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_

**Vehicle Information**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag: \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**Emergency Alerts:** ( i.e. DO NOT ADMIT, CALL FOR ALL VISITORS ) \_\_\_\_\_

I understand I must use my PIN# as provided by Newport Isles for identification when authorizing access to the property for any guest or visitor to my home. Further, I understand all guests will be required to show Photo ID whether or not the guest is listed on this form. I understand it is my responsibility to update this form with any changes.

Occupant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this completed form in person to the Newport Isles Clubhouse**  
**PHOTO ID WILL BE REQUIRED OF OWNERS, TENANTS, GUESTS**  
**Tenants must provide a copy of a current lease**  
**1856 SW Newport Isles Blvd.**  
**Port Saint Lucie, FL 34953**  
**Tel: (772) 345-1642**

\*\*\*\*\*  
**OFFICE USE ONLY**

**APPROVED FOR ENTRY { }YES BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE ENTERED \_\_\_\_\_**

**LEASE APPLICATION CHECK LIST:**

***Did you include...?***

- \_\_\_\_\_ Executed copy of lease. Said lease must comply with all terms of the governing documents; both tenant and landlord are jointly and severally liable to the association for any fines levied or damages caused by tenant to any common areas.
- \_\_\_\_\_ Completed application (2 pages) signed by both owner and tenant.
- \_\_\_\_\_ Resident Access form completed & signed for gate access.
- \_\_\_\_\_ Screening form completed for each person age 18 and older.
- \_\_\_\_\_ Application fee in the amount of \$125.00 payable to Newport Isles (must be a separate check).
- \_\_\_\_\_ Check in the amount of \$19.00/each for each person listed on lease payable to Newport Isles.
- \_\_\_\_\_ Check in the amount of \$10.00/each for each occupant age 18 or older payable to Newport Isles.
- \_\_\_\_\_ Security Deposit in the amount of \$500.00 payable to Newport Isles (must be a separate check).

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**Internal Use Only**

- \_\_\_\_\_ Owner account must be current.
- \_\_\_\_\_ Attend Welcome Committee Meeting. Date Attended: \_\_\_\_\_
- \_\_\_\_\_ Date Certificate of Approval / Denial issued: \_\_\_\_\_

Comments: \_\_\_\_\_

\*Once Certificate of Approval / Denial issued, Association will destroy Screening forms and results.