

Cobblestone Country Club Homeowners Association

c/o Coastal Property Management
10 SE Central Parkway, Suite 400
Stuart, FL 34994
Office: (772) 600-8900 Fax: (772) 266-9801

Lease Application Check List

All items must be submitted, or your application will not be processed. This form must be submitted with Paperwork.

General submission requirements

- Fully executed lease application
- Fully executed lease agreement
- \$150 Application fee (non-refundable) – Please make check payable to **COBBLESTONE COUNTRY CLUB HOMEOWNERS ASSOCIATION**
- \$50 for Background Check (required) non-refundable) for each applicant/occupant over 18 years of age. Please make the check payable to **COBBLESTONE COUNTRY CLUB HOMEOWNERS ASSOCIATION**
- Pet Application Must be accompanied by copy of official record from Veterinarian on Veterinarians letterhead showing breed, current weight, expected mature weight and current vaccinations
- Photo of pet
- Clear copy of each applicant's current ID
- Signed Rules and Regulations

***Payments are only accepted in the form of checks or money orders**

- Tenant's Realtor Info for Lease
 - Company Name: _____
 - Company Address: _____
 - Company Phone: _____
 - Company Email: _____
 - _____
- Landlord/Current Owner Realtor's Info for Lease
 - Company Name: _____
 - Company Address: _____
 - Company Phone: _____
 - Company Email: _____
 - _____
- Certificate of Approval delivery option (Mark "X" by delivery option)
 - _____ Mail original to Tenants Realtor and email copy to _____
 - _____ Mail original to Owners Realtor and email copy to _____

COBBLESTONE COUNTRY CLUB HOMEOWNERS ASSOCIATION LEASE APPLICATION

c/o Coastal Property Management
10 SE Central Parkway, Suite 400
Stuart, FL 34994

The Association shall review the proposed application within **thirty (30) days** of receipt of required information, documents, and fees. Please ensure all required items are submitted as a complete package at least **30 days before Occupancy** – incomplete packages will not be processed. **Applicants must be approved before occupancy.**

APPLICATION INSTRUCTIONS

APPLICANT must submit:

- Completed Application (Application will not be processed without all signatures)
- Signed copy of Lease Agreement
- **\$150.00 Application Fee** (non-refundable) made payable to: *Cobblestone Country Club HOA*
- **\$50.00 for Background Check** (required) (non-refundable) **for each applicant/occupant over 18 years of age.** Please make check **payable to Cobblestone Country Club HOA**
- **Pet application** Must be accompanied by copy of official record from veterinarian on veterinarian's letterhead showing breed, current weight, expected mature weight and current vaccinations.
- Photo of pet(s)
- Clear copy of each applicant's current photo ID
- Signed Rules & Regulations disclosure statement

*Payments are only accepted in the form of checks or money orders

All items must be submitted as an entire packet to:

Coastal Property Management
10 SE Central Parkway, Suite 400
Stuart, FL 34994

Thank you in advance for your cooperation in following this process. If you have any questions, please call:
Coastal Property Management – (772) 600-8900

LEASE APPLICATION

Date of Application _____ Lease Start Date: _____ Ends: _____

Property Address: _____ SE Riverboat Drive, Stuart FL, 34997 Unit Number: _____

NAME(s) OF APPLICANT: _____ Email: _____

PRESENT ADDRESS: _____ City _____ State _____ Zip _____

Cell phone: () _____ Home phone () _____ Business Phone () _____

Previous Address: _____ How Long? _____

If currently renting: Landlords name: _____ Contact# _____

CO-APPLICANT: _____ Email: _____

PRESENT ADDRESS: _____ City _____ State _____ Zip _____

Cell phone: () _____ Home phone: () _____ Business Phone: () _____

NUMBER PEOPLE WHO WILL BE RESIDING AT THE HOME _____ (No more than 4 residents per unit)

OCCUPANTS RESIDING AT RESIDENCE

NAME _____ RELATIONSHIP _____ AGE _____

NAME _____ RELATIONSHIP _____ AGE _____

NAME _____ RELATIONSHIP _____ AGE _____

VEHICLE(S) RESIDING AT RESIDENCE

Passenger Cars and trucks permitted. No oversized or modified trucks, commercial vehicles, recreational vehicles, campers, trailers, boats, motorcycles, motor scooters, mopeds. No vehicles with business signage or equipment.

MAKE _____ MODEL _____ COLOR _____ YEAR _____ TAG # _____

MAKE _____ MODEL _____ COLOR _____ YEAR _____ TAG # _____

EMPLOYMENT HISTORY

CURRENT EMPLOYER _____ JOB TITLE _____ HOW LONG _____

EMPLOYER ADDRESS _____

EMPLOYER PHONE _____

CO-APPLICANT'S CURRENT EMPLOYER _____ JOB TITLE _____

HOW LONG _____ EMPLOYER ADDRESS _____

EMPLOYER PHONE _____

CHARACTER REFERENCES – MUST KNOW APPLICANT (S) FOR 3 YEARS CANNOT BE FAMILY MEMBERS. Must know all applicants. If not, add references for each applicant—use separate sheet)

1. Name _____ Phone _____
Address _____
Years known _____

2. Name _____ Phone _____
Address _____
Years known _____

3. Name _____ Phone _____
Address _____
Years known _____

PET INFORMATION – MUST SUBMIT PHOTO OF PETS

Maximum of **three** pets per unit. Restricted to cat or dog

Please list pets below if applicable.

Cat _____ Dog _____ Breed _____ Weight _____ How old _____

Cat _____ Dog _____ Breed _____ Weight _____ How old _____

Cat _____ Dog _____ Breed _____ Weight _____ How old _____

Should you have a dog, now or in the future, regardless of weight, emotional support animal or service dog designation, and your dog attacks or bites other dogs or people, you hereby agree that upon receiving notice from the Association that such an event has occurred that you will have your dog removed from Cobblestone Country Club.

Signed _____ Date _____

Printed Name _____

Signed _____ Date _____

Printed Name _____

****This page must be signed by everyone even if you do not have a pet right now**

ADDENDUM TO APPLICATION CONCERNING PET OWNERSHIP

Per Martin County Ordinance #710 Sec. 9.61 & 9.62, owners are required to have their cats and dogs vaccinated against rabies and obtain a Martin County Animal License. To obtain a pet license, bring a copy of a current rabies vaccination certificate issued by a veterinarian, and if the animal is microchipped or altered, bring proof of altering and microchipping

Date _____

Applicant Name _____

Applicant's Current Address _____

Pet #1: Cat or Dog (circle)

Breed _____ Current weight _____ Maximum Mature Weight _____

Rabies vaccination date _____ Tag number _____

Pet #2: Cat or Dog (circle)

Breed _____ Current weight _____ Maximum Mature Weight _____

Rabies vaccination date _____ Tag number _____

Is this pet registered as a Service Animal? _____

Is this pet documented as an Emotional Support Animal? _____

Pet #3: Cat or Dog (circle)

Breed _____ Current weight _____ Maximum Mature Weight _____

Rabies vaccination date _____ Tag number _____

*****NOTE THAT ALL Service and/or Emotional Service Animals must have included with this application documentation that complies with the current Florida Statute 760.27*****

The owner has read and understands the rules and regulations as well as the Covenants and Restrictions of Cobblestone Country Club regarding pets.

The owner understands that failure to leash the pet is a violation of the Covenant and County Ordinance and may result in removal of the pet. The owner understands that failure to pick up and properly dispose of waste from the pet is a violation of the Covenant and

County Ordinance and may also result in removal of the pet. The owner understands if the pet becomes a nuisance to any member of the community (i.e., barking) it is a violation of the covenant and may result in the removal of the pet. The owner understands that if for any reason the pet exceeds the forty (40) pound limit, it will be caused to remove the pet. The owner also understands they must submit to the continual verification of weight (up to three times a year) regarding any pet approaching the maximum or expected maximum weight.

This document must be signed by a licensed veterinarian and must identify the pet by breed and weight. This document must also state the expected weight of the pet at maturity and must have an original signature from the veterinarian. No copies will be accepted. **(Attach copy of pet's most recent visit to the vet to this application).**

Veterinarian Signature _____ Print _____

Owner's Signature _____ Print _____

Cobblestone Country Club Homeowners Association

LEASE APPLICATION
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10 SE Central Parkway, 400
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CRIMINAL BACKGROUND CONSENT FORM

The undersigned being a new owner applicant(s) of the following address:

I/We hereby authorize Cobblestone Country Club Homeowners Association, Inc. and Coastal Property Management and its agents to conduct a background investigation of myself, as a prospective owner in the Association and therefore authorize criminal histories of myself to be searched for the purpose of determining my suitability for residence in the community. I understand that the results of such an investigation will be shared by the property manager with the Association's Board of Directors.

Dated: _____

_____ Date of Birth _____
(Signature)

_____ Social Security No. _____
(Print name)

Driver's License No. _____ State of Issuance _____

_____ Date of Birth _____
(Signature)

_____ Social Security No. _____
(Print name)

Driver's License No. _____ State of Issuance _____

Must be signed by all applicants. Use an additional copy of this sheet if needed for additional applicants.

PLEASE ATTACH A CLEAR COPY OF ALL APPLICANTS CURRENT PHOTO ID

**COBBLESTONE COUNTRY CLUB HOMEOWNER'S ASSOCIATION
AGREEMENT TO COMPLY WITH ALL RULES AND REGULATIONS**

I have read and understand the River Pines Rules and Regulations as contained in the Governing Documents of Cobblestone Country Club. These documents may be viewed on the Cobblestone Country Club HOA's website. I agree to comply fully with those rules and regulations during my residency.

I have read the Disclosure Statement and agree to comply fully with all the rules during my residency at Cobblestone Country Club.

I understand that any misrepresentation contained in my application renders me subject to eviction by the River Pines Homeowner's Association.

The undersigned agrees to all the terms and conditions of the application for occupancy and the residents' rules and regulations. Should the undersigned violate any of those terms and conditions, they agree to fully reimburse the Homeowner's Association for any reasonable attorney's fees incurred by the Association to ensure the undersigned's compliance, whether or not said non-compliance is resolved as a result of an attorney writing a letter, a lawsuit being instituted, or the voluntary termination of the undersigned's residency at River Pines.

Tenant Signature

Co-Tenant Signature

Print Name

Print Name

Date Submitted: _____