

Catalina at Winkler

Homeowners Association, Inc.

c/o Hayden & Associates
12650 Whitehall Drive
Fort Myers, Florida 33907
Ph: 239-489-4890 Fax: 239-489-4980

Lease/Sale Application

This application must be submitted along with a non-refundable processing fee of \$100.00 to the Board of Directors via Hayden & Associates. A minimum of 20 days processing time is required prior to the start of any lease or sale closing. A copy of the lease/sales contract must be included with the application and a copy of each applicant's driver's license. Applicant will be responsible for submitting a national background check on all applicants over the age of 18 yrs. Make checks payable to Hayden & Associates.

NO NEW TENANTS OR OWNERS MAY MOVE INTO CATALINA AT WINKLER WITHOUT PRIOR APPROVAL OF THE BOARD OF DIRECTORS.

Address & Unit # _____

Present Owner _____ Phone # _____

Owner's Address _____

Personal Information: Applicant Spouse/Co-Applicant

Tenant/Buyer(s) Names: _____

Email Address: _____

Vehicle (s): _____

Year/Make/Model _____

Will anyone other than those listed above occupy this unit? _____ No _____ Yes

If Yes, whom? _____

Pets? If yes, Breed & Weight? _____

Do the seller/s have any Fobs and/or Keys they will be leaving behind for the community?

If so, please note how many and the numbers on the Fobs : _____

Residential History:

Present Address: _____

How long? _____ Phone Number: _____

Emergency contact:

Name/Relationship: _____

Address: _____

Phone Number: _____

References: (2) – Please give names, addresses, and phone numbers:

1. _____

2. _____

Please read the following and sign this application:

I have received and read a copy of the Catalina at Winkler Association’s Rules and Regulations, Use Restrictions, and ByLaws, along with this application. I understand these Rules, Regulations, Use Restrictions, ByLaws, and agree to abide by them as long as I reside at Catalina at Winkler. I understand that this is a Deed Restricted Community. Also, I am aware that there is a \$250 Capital Contribution on all sales.

Applicant	
Signature _____	DOB: _____
Co-Applicant _____	DOB: _____

Approval:

Board Member/Agent: _____ Date _____

If application is denied, give reason: _____

Approval will be based on the Condition that all Outstanding Monetary Obligations Due and Owing to Association are Paid in Full at or Prior to Closing.