



Southwind Owners' Association at Fort Myers, Inc.

c/o Coastal Association Services, LLC.

1314 Cape Coral Pkwy East, Suite 205 Cape Coral, Florida 33904

T: 239-689-3080 // F: 1-844-273-1058 // Email: info@coastalassociation.biz

Notice of Lease/Purchase

This notice of lease/sale and a fully executed copy of the related lease/sales agreement must accompany this form and any other supporting documents be mailed to Coastal at the above address. Please note:

- Use of unit is limited to single family residency
- Units may not be sublet
- Property modifications require board approval

This notice to the Association is for a: Sale _____ Lease _____

Please PRINT Purchaser(s)/Lessee(s) Name and Property address:

FOR A LEASE: THIS SECTION TO BE COMPLETED BY CURRENT OWNER,

In compliance with the Declaration of Covenants and Restrictions of the Association names above, I (we) hereby serve notice, as Owner(s) or Agent of the above referenced unit, I (we) intend to offer said for lease in accordance with the attached lease agreement. Unit is to be leased for the period beginning: _____ and ending _____. I(we) understand and hereby agree that I (we) am fully responsible for ensuring the lessee and their guests abide by the Association's Declaration of Covenants and Restrictions and Rules and Regulations. I further agree to provide said Lessee with copies of same. Please provide current owner contact information:

Owner Name/Mailing address: _____

Phone #: _____ Alternate phone #: _____

PURSUANT TO FLORIDA STATUTE, IT IS HEREBY AGREED UPON, BY THE OWNER AND LESSEE, THAT IN THE CASE WHEREIN THE OWNER HAS FAILED TO MEET THE OBLIGATION OF MONTHLY ASSESSMENTS OR SPECIAL ASSESSMENTS DUE TO THE SOUTHWIND HOA, AND IS PAST DUE A MINIMUM OF 90 DAYS, THE LESSEE OF THE UNIT WILL MAKE THE FULL RENTAL PAYMENT (NORMALLY DUE TO THE OWNER) TO SOUTHWIND HOA..

THIS RENT PAYMENT WILL BE APPLIED TO THE CURRENT ASSESSMENT DUE, PLUS LATE FEES AND INTEREST. RENTAL PAYMENTS WILL CONTINUE TO BE MADE TO THE ASSOCIATION UNTIL SUCH TIME AS THE ACCOUNT OF THE OWNER IS CURRENT. THE LESSEE WILL BE NOTIFIED IN WRITING IF THEY WILL BE REQUIRED TO RENDER THEIR MONTHLY RENT TO THE ASSOCIATION DIRECTLY. FAILURE TO MAKE THE FULL MONTHLY PAYMENTS DIRECTLY TO THE ASSOCIATION WILL RESULT IN THE TERMINATION OF THE LEASE AND EVICTION. BE ADVISED THAT THE OWNER OF THE UNIT (LESSOR) WILL CONTINUE TO BE REQUIRED TO MEET HIS/HER OBLIGATIONS TO THE TENANT UNDER THE FLORIDA TENANT/LANDLORD STATUTES (CHAPTER 83).

Owner Signature and Date _____

Lessee Signature and Date _____



FOR A SALE OR LEASE:
THIS SECTION TO BE COMPLETED BY LESSEE/PURCHASER,

I (we) have read and understand and will be bound by the Rules and Regulations of the above Association including those applicable to both the unit and common property. I (we) understand that any violation of the terms, provisions, conditions and covenants of the Association Documents or Rules and Regulations provides cause for immediate action as therein provided, or termination of the leasehold under appropriate circumstances.

Lessee/ Purchaser (1) Signature and Date

Lessee/Purchaser (2) Signature and Date

Phone number: _____

Alternate Phone: _____

Email: _____

Preferred mailing address for Association records AFTER closing:

Purchaser: Will this property be a: _____ Permanent residence _____ Seasonal residence

Vehicle Information:

Make _____ Model _____ Year _____ Tag# _____

Make _____ Model _____ Year _____ Tag# _____

Purchaser, please be advised that any exterior alterations to the property require Board approval via an architectural review form, which can be obtained through Coastal Association Services, LLC.

