

RINGLING PROFESSIONAL CENTER, INC.
2831 Ringling Blvd Sarasota, FL 34237
Mailing Address: P. O. Box 52342 Sarasota FL 34232
Phone: 941.216.7965

APPLICATION TO LEASE AN OFFICE CONDOMINIUM UNIT

This application has been designed with a view to complying with the requirements of Paragraph 13 of the Declaration of Condominium of Ringling Professional Center. **Owners are reminded that a maximum of two (2) rentals are allowed per calendar year with a minimum length of six (6) months per lease. Owners are also reminded that a tenant may occupy the premises as his, her or its business. No subleases of a unit or of rooms (offices) in a unit are allowed by the Declaration of Condominium.**

The undersigned owner of Unit # _____, Ringling Professional Center, a condominium, makes application for transfer of the referenced unit by lease. The lease is not for less than six (6) months.

The lease is subject to approval by the Board of Directors of the Condominium and is scheduled to begin the ____ day of _____, 20 ____.

OWNER:

Signature: _____

Print Name: _____

Telephone Number: _____

Cell Number: _____

Email Address: _____

A NON-REFUNDABLE PROCESSING FEE OF \$150.00 AND A COPY OF THE LEASE AGREEMENT MUST ACCOMPANY THIS APPLICATION! Payable to Ringling Professional Center, Inc

***Please supply copy of lease, Lessee's business license for City of Sarasota, County of Sarasota, and Certificate of Insurance for interior contents. Move-in AFTER Board approval. Please allow up to 10 days for approval. Signage at the expense of the Tenant**

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INFORMATION REGARDING PROSPECTIVE TENANT

Name of lessee: _____

Name of lessee business: _____

Address where lessee may be reached : _____

Mailing address: (if different from above) _____

Email address: _____

Telephone Number where lessee may be reached : _____

Type of business to be operated on premises: _____

Tenants must abide by all the restrictions contained in the Bylaws, Articles, Declaration and Restrictions which are imposed by the Ringling Professional Center Condominium Association.

The undersigned hereby agrees that if this application is approved, I and all persons occupying the transferred unit will comply with the rules and regulations of Ringling Professional Center, Inc.

Under penalty of perjury, the undersigned certifies that the foregoing information regarding the lessee is true and correct. The lessee has received and read a copy of the rules and regulations of the association.

LESSEE SIGNATURE:

Print Name: _____ Date: _____

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ACTION TAKEN BY THE BOARD OF DIRECTORS OF RINGLING PROFESSIONAL CENTER, INC.

[] APPROVED

[] REJECTED

Date: _____

Signed: _____

Date: _____

Signed: _____

Date: _____

Signed: _____