

**CASA DI AMICI CONDOMINIUM ASSOCIATION, INC.**

*A Corporation Not-For-Profit*

c/o Sunstate Association Management Group, Inc.

P O Box 18809, Sarasota, FL 34276

Phone 941- 870-4920 Fax 941-870-9652

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**REQUEST FOR RE-APPROVAL OF LEASE**

No Renewal Fee Required

OWNER(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

SUBJECT UNIT: \_\_\_\_\_

CURRENT TENANT(S): \_\_\_\_\_

Original Lease Term:

From: \_\_\_\_\_ To: \_\_\_\_\_

It is our intention to renew the previously approved lease (minimum of 3 months rental required) for the period of: **Attach new executed lease agreement.**

From: \_\_\_\_\_ To: \_\_\_\_\_

If any change(s) have occurred regarding previously authorized persons living in your Unit and vehicle information as shown on the original Lease Application and Occupancy Approval forms, it must be so noted here: **Please provide copy of current Auto Insurance and Driver's license.**

\_\_\_\_\_  
\_\_\_\_\_

We understand no pet(s) are allowed by Tenants.

Therefore, we seek Board Approval of the above lease extension.

\_\_\_\_\_/\_\_\_\_\_  
**Signatures**

BOARD APPROVAL: \_\_\_\_\_ Date: \_\_\_\_\_