

**SANDCASTLE BEACH CLUB
905 ESTERO BLVD.
FORT MYERS BEACH, FL 33931
(239)463-9368/FAX: (239)463-1974**

RENTAL AGREEMENT

OWNER: _____ SS# _____
If using more than one owners name, please specify which owner's SS# is being used

ADDRESS: _____ CITY: _____

STATE _____ ZIP _____

HOME#: _____ ALTERNATE#: _____

UNIT#: _____ WEEK#: _____ UNIT#: _____ WEEK#: _____

CONDITIONS

1. I hereby grant Sandcastle Beach Club the exclusive right to rent the property listed above at the rates and terms as stated herein for the above week(s) for the year 20____.
2. Termination of this agreement must be in writing and must be received in the Sandcastle Office prior to rental dates, provided that the unit has not already been rented for that period.
3. Upon rental of said property, I agree to pay Sandcastle Beach Club a **10%** Administration Fee of the gross rental rate. Foreign owners may have an additional 30% withheld as per IRS regulations. I understand that in the event the renter cancels and the unit is not re-rented, any rental monies or deposit shall be forfeited to the unit owner with the Administration Fee deducted.
4. I understand that any overdue fees due the Condominium Association will be deducted from the rental proceeds.
5. If Sandcastle is unable to secure a weekly rental, Sandcastle may rent the unit as per SCBC regulations; if the unit is rented to more than one party during the course of the week, there will be an additional cleaning charge for each rental which will be deducted from the rental proceeds.

**I UNDERSTAND THAT I MAY NOT USE, EXCHANGE, LIST WITH ANOTHER AGENCY, OR
MAKE ANY OTHER ARRANGEMENT FOR THE OCCUPANCY OF THE ABOVE
APARTMENT(S) DURING THE PERIOD OF THIS AGREEMENT.
A NEW RENTAL AGREEMENT MUST BE FILED FOR EACH YEAR.**

OWNER'S SIGNATURE: _____ DATE: _____

_____ DATE: _____

Received by Sandcastle Beach Club- **Signature:** _____ **Date:** _____