

APPLICATION FOR LEASE, ROOMMATE, SALE or TITLE TRANSFER

ONE APPLICATION PER PERSON UNLESS MARRIED

Applicant's Name: _____ Phone Number _____

Applicant's Email Address: _____

Unit Owner's Name: _____ Unit # _____

Application to: Rent () Lease () Title Transfer () Roommate ()

INSTRUCTIONS for APPLICATION for LEASE, ROOMMATE, SALE or TITLE TRANSFER

1. Complete every blank line on the attached documents. All questions must be answered. All blanks must be completed. Should the question not apply, answer 'NA'.
2. PRINT complete mailing address, including zip codes.

ILLEGIBLE, INACCURATE OR INCOMPLETE APPLICATIONS CAN DELAY THE APPROVAL PROCESS. STATUTE PERMITS A CONDO ASSOCIATION 30 DAYS TO PROVIDE AN APPROVAL.

Return the attached, along with a copy of the lease or purchase agreement, application fee and necessary pet information if applicable to:

Eastside Management

PO Box 70264

Fort Lauderdale FL 33307

DO NOT FAX THIS APPLICATION TO THE OFFICE.

3. A nonrefundable application fee must accompany EACH application. Please submit **\$100** payment in the form of cashier's check or money order payable to **BELLA VISTA TERRACE.**
4. The references listed on the application must be thoroughly investigated, prior to any meeting with the interview committee. The Association has thirty (30) days from the receipt of a valid and completed set of responses to the association's inquiries in which to give their decision.
5. If a dog or cat is permitted by the association and will occupy the unit, a picture of the pet and their last medical records must be attached. Pets are always subject the rules of the individual condo / co-op / HOA
6. **Prior to final approval, all applicants must be interviewed. The board normally gives management their decision within twenty-four (24) hours following the interview.**
7. Should the unit have funds owing the association, an application for lease or sale will not be considered a valid one until such time as all balances due the association have been

satisfied. Such funds are not deemed paid in full until all checks have cleared the bank. Please allow additional time for all out of the area checks to clear before requesting an interview.

8. If approval is given, on the purchase of the unit, management will furnish the properly written approval form to the designated party. Should the application be for a purchase, the designated party then agrees to furnish copies of the WARRANTY DEED, along with the buyer's LEGAL MAILING ADDRESS, and PHONE NUMBER to Management immediately following the close of a sale. Management will not amend their records without a recorded warranty deed.

It is the seller's or lessor's obligation to furnish the following to the buyer/lessee:

- a.) **A full set of the documents (on sale only)**
- b.) **All information relating to future payments of maintenance fees due the association (on sales only)**
- c.) **A Copy of the rules & regulations**
- d.) **Key(s) to the Unit**
- e.) **A mailbox key and other keys for pool, etc.**

By signing, the applicant recognizes that the Association, or their agent, may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the Association. The investigation may be made of the applicant's character, general reputation, and personal characteristics and mode of living if applicable. The Association may also require a credit report through a credit-report agency.

I (we) hereby agree to abide by all the restrictions contained in the by-laws, Rules and Regulations, and restrictions which are, or may be, imposed in the future, by the Association.

I UNDERSTAND THE REQUIREMENTS AND OBLIGATIONS, AS SET FORTH ABOVE AND AGREE TO COMPLY WITH SAME

Applicant's Signature: _____ Date: _____

Spouse: _____ Date: _____

Current Owner: _____ Date: _____

Other Owner: _____ Date: _____

APPLICATION FOR OCCUPANCY SECTION I

Anyone who will stay more than 30 days must make application and have background check.

Date received by Management: _____ Application fee(s): _____

PLEASE PRINT: Complete ALL questions and fill in ALL blanks. If incomplete it will be returned to sender. Include a copy of the lease or purchase agreement.

Applicant Name(s): _____
Date of Birth: _____ Age: _____ Phone: _____
Address: _____
City, State, Zip: _____
Desired date of Occupancy: _____ Number of people to Occupy: _____

Pets: Yes () No () Breed: _____ Weight: _____
Broward County Animal Control License number: _____

Applicant's name: _____
Date of Birth: _____
S.S. #: _____
() Single () Married () Separated () Divorced

Maiden Name: _____
Phone: _____
In case of Emergency notify: _____
Relationship/Phone: _____
Address: _____

Spouse's name: _____
Date of Birth: _____
S.S. #: _____
Maiden Name: _____
Phone: _____
In case of Emergency notify: _____
Relationship/Phone: _____
Address: _____

Please list all occupants under 18 who will reside at the residence if approved:

	<u>Name</u>	<u>Relationship</u>	<u>Date of Birth</u>
1	_____	_____	_____
2	_____	_____	_____

USE ADDITIONAL SHEET OF PAPER IF MORE THAN TWO ADDITIONAL RESIDENTS.

No more than 2 persons may occupy a One Bedroom unit.

No more than 4 may occupy a Two Bedroom.

All persons over age 18 must make separate application and pay Application Fee

Bella Vista Terrace

Provide address for all correspondence to be sent to owner / occupant if approved:

____ Rental Application: Rental period from _____ to _____

____ Resale/Transfer Application:

Desired closing/transfer date _____

Resale/Transfer Only: In making the foregoing application, I represent to the Board of Directors that the purpose for the purchase of an apartment is as follows:

Permanent Residence _____

Seasonal Residence _____

Investment For Rental _____

1. I have received a copy of all Condominium Documents (buyers only) and Rules and Regulations (buyers and tenants) : **Yes** _____ **No** _____
2. I hereby agree for myself and on behalf of all persons who may use the apartment which I seek to purchase/lease that I will abide by all of the restrictions contained in the By-laws, Rules & Regulations, Condominium Documents, and restrictions, which are or may be in the future, imposed by the Condominium Association.
3. I understand that I will be advised by the Administration Office of either Acceptance or denial of this application.
4. I understand that the acceptance for purchase of an apartment at the Condominium is conditioned upon the truth and accuracy of this application and upon the approval of the board of Directors. Occupancy prior to approval is prohibited.

In making the foregoing application, I am aware that the decision of the Condominium Association will be final and no reason will be given for any action taken by the Board. I agree to be governed by the determination of the Board of Directors.

Applicant _____ Date: _____

Signature:

Spouse _____ Date: _____

Signature:

RESIDENCE HISTORY

SECTION II

(PLEASE PRINT)

- 1) Present address: _____
City, State, Zip _____
Apt. or Condo # _____
Phone _____
- Apt or Condo Name _____
Date of Occupancy _____
Landlord or Mortgagee _____
Phone _____
Landlord Address _____
City, State, Zip _____
Mortgage # _____
- 2.) Previous Address if less than 2 yrs: _____
City, State, Zip _____
Apt or Condo # _____
Phone _____
Apt or Condo Name _____
Apt or Condo # _____
Landlord or Mortgagee _____
Phone _____
Landlord Address _____
City, State, Zip _____
Mortgage # _____

EMPLOYMENT & BANKING REFERENCES

SECTION III

(PLEASE PRINT)

- A.) Employed by _____
Phone _____
How Long _____
Dept. or Position _____
Monthly Income _____
Address _____
City, State, Zip _____

- B.) Spouse's employer (if applicable) _____
Phone _____
How Long _____
Dept. or Position _____
Monthly Income _____
Address _____
City, State, Zip _____
- C.) Bank Reference _____
Phone _____
How Long _____
Check # _____
Savings # _____
Address _____
City, State, Zip _____

CHARACER REFERENCES SECTION IV

(PLEASE PRINT)

1. _____

Contact Phone _____
Address _____
City, State, Zip _____

2. _____

Contact Phone _____
Address _____
City, State, Zip _____

3. _____

Contact Phone _____
Address _____
City, State, Zip _____

**AUTHORIZATION TO RELEASE BANKING, CREDIT, RESIDENCE &
EMPLOYMENT INFORMATION SECTION V**

I have named you as a reference (SECTIONS III, IV, V), on my application for residence. You are hereby authorized to release and give to the below mentioned party(s) or their Attorney or Representative, any and all information they request concerning my banking, credit, residence, and employment in reference with my/our application made for residency.

_____ Date: _____
(Applicant's signature)

_____ Date: _____
(Applicant's signature)

CONFIRMATION OF RULES AND REGULATIONS RECEIVED

I (We), _____
(Please print name(s))

HAVE READ THE RULES AND REGULATIONS AND FULLY UNDERSTAND EACH OF THE RULES AND WILL ABIDE BY THEM SO LONG AS I LIVE AT:

Unit _____ Address _____

AND FURTHER I / WE UNDERSTAND THAT A VIOLATION OF THE RULES AND REGULATIONS COULD RESULT IN A LEGAL ACTION, FINE OR EVICTION

Signed this _____ day of _____, 200____.

Buyer/Tenant Signature: _____

Buyer/Tenant Signature: _____

Vehicle Information:

Make _____ Model: _____ State _____

Color _____ Year _____ License Plate # _____

Bella Vista Condominium residences each has ONE assigned parking space. Guest parking spaces are not to be used for any resident's second vehicle.