

Consolidated Community Management, Inc.

7124 N. Nob Hill Road
Tamarac, Florida 33321
954-718-9903

PURCHASE APPLICATION

Monte Carlo Townhomes of Margate HOA, Inc.

*Applications and supporting documents must be hand delivered or mailed.
Faxed or e-mailed applications and supporting documents will not be accepted.*

Applicant(s) must initial each line indicating the required documentation listed is enclosed.

- _____ **\$100 non-refundable application fee** per applicant/occupant age 18 or over (\$100 per married couple)
Cash or money order only made payable to: **Consolidated Community Management, Inc.**
- _____ Sales Contract (Must be fully executed)
- _____ Proof of funds to close (and mortgage approval letter if financed).
- _____ Two (2) months maintenance capital contribution check only payable to Monte Carlo Townhomes of Margate HOA, Inc.
- _____ Maximum Rentals (15%) Cap.
- _____ Last three (3) months bank statements
- _____ Last three (3) pay stubs or proof of income, such as pensions and/or social security benefits
- _____ Copy of driver's license / ID for all applicants
(Foreign nationals must provide a copy of current VISA and Passport)
- _____ Copy of current registrations for all vehicles parked on property
- _____ Application for Occupancy Form
(Copy of marriage certificate required if married with different last names)
- _____ Acknowledgement Pages (three pages) - must be signed by ALL applicants
- _____ Pet Verification Form.
- _____ I have read and understand the Rules and Regulations.
- _____ I have read and understand the governing documents / by-laws
- _____ No leasing within one year of purchase.

All items listed are required at the time the application is submitted and an estoppel must have been requested by the title company, otherwise it will not be accepted.

Please note:

- **Additional documentation may be required.**
- **The application process may take up to 30 days.**
- **A certificate of approval will NOT be issued without an estoppel being completed on the property.**
- **Please do not schedule closings or occupancy until you have been notified of applicant's orientation date.**
- **DO NOT CONTACT our office to verify the status of the application until 21 days from date of submission.**

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

FOREIGN NATIONALS / FOREIGN INVESTORS

Applicant(s) must initial each line indicating the required documentation listed is enclosed.

- _____ Copy of current VISA and PASSPORT
- _____ Proof of employment and income
(Must be NOTARIZED and translated into U.S. DOLLARS and into ENGLISH)
- _____ If self-employed, provide proof of ownership and income from that company
(Must be NOTARIZED and translated into ENGLISH)
- _____ Provide Articles of Incorporation (If buying as a corporation)

CANADIAN CITIZENS

Applicant(s) must initial each line indicating the required documentation listed is enclosed.

- _____ Must provide Canadian credit report

TRUSTS

Applicant(s) must initial each line indicating the required documentation listed is enclosed.

- _____ When buying as a Trust, please provide the Trust organization papers

CORPORATIONS or LLCs

Applicant(s) must initial each line indicating the required documentation listed is enclosed.

- _____ Copy of the Articles of Incorporation for the corporation or LLC
- _____ Provide three (3) last bank statements for the corporation or LLC
- _____ Proof of income and last three (3) bank statements of Managing Member or President
- _____ Managing Member or President is required to provide all personal information, including social security number.
- _____ Managing Member or President is required to sign the application

THIS IS THE MINIMUM DOCUMENTATION REQUIRED. DURING THE APPLICATION PROCESS ADDITIONAL DOCUMENTATION MAY BE REQUIRED; EACH CIRCUMSTANCE IS DIFFERENT.

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

APPLICATION FOR OCCUPANCY - PURCHASE

INSTRUCTIONS:

1. **Any occupant age 18 or older must complete this application and pay an application fee.** If occupants are not legally married each person must pay a separate application fee.
2. Print legibly or type all information. Account and telephone numbers and complete addresses are required. If any question is not answered or left blank; this application may be returned, not processed and not approved. Missing information will cause delays in processing your application. All application spaces **MUST** be filled in.
3. Only the applicants are authorized to sign all forms.

Today's date: _____ Desired date of Occupancy: _____

Address of unit or home for this application: _____

Name of Realtor: _____

Cell phone & e-mail of Realtor: _____

PURCHASER / OCCUPANT INFORMATION

	APPLICANT	CO-APPLICANT
<p><u>Marital Status</u></p> <p><input type="checkbox"/> Single</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Divorced</p>	<p>Name: _____ Last</p> <p>_____ First Middle Initial</p> <p>_____ Maiden</p> <p>SSN: _____ - _____ - _____</p> <p>DOB: _____ / _____ / _____</p> <p>DL / ID: _____ NUMBER STATE</p>	<p>Name: _____ Last</p> <p>_____ First Middle Initial</p> <p>_____ Maiden</p> <p>SSN: _____ - _____ - _____</p> <p>DOB: _____ / _____ / _____</p> <p>DL / ID: _____ NUMBER STATE</p>
<p>Address</p>	<p>Current street address _____</p> <p>City _____ State _____ Zip Code _____</p>	<p>Current street address _____</p> <p>City _____ State _____ Zip Code _____</p>
<p>Phone</p>	<p>(____) _____ Home / Primary Phone #</p> <p>(____) _____ Cell /Secondary Phone #</p>	<p>(____) _____ Home / Primary Phone #</p> <p>(____) _____ Cell /Secondary Phone #</p>
<p>Email</p>	<p>Email address _____</p>	<p>Email address _____</p>
<p>NO. OF OTHERS TO OCCUPY</p> <p>(____)</p>	<p>Name: _____ Last</p> <p>_____ First</p> <p>Age: _____</p> <p>Relationship: _____</p>	<p>Name: _____ Last</p> <p>_____ First</p> <p>Age: _____</p> <p>Relationship: _____</p>

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

APPLICATION FOR OCCUPANCY - PURCHASE

	APPLICANT	CO-APPLICANT
<u>INCOME</u>	PROOF OF INCOME MUST BE ATTACHED	PROOF OF INCOME MUST BE ATTACHED
	Monthly Income: _____	Monthly Income: _____
	Source(s): <input type="checkbox"/> Employer <input type="checkbox"/> Self-Employed	Source(s): <input type="checkbox"/> Employer <input type="checkbox"/> Self-Employed
	<input type="checkbox"/> Retirement <input type="checkbox"/> Other _____	<input type="checkbox"/> Retirement <input type="checkbox"/> Other _____
Employer	Employed by: _____	Employed by: _____
	Phone: () _____	Phone: () _____
	Start date: _____	Start date: _____
	Position: _____	Position: _____
	Hrs. per week: _____	Hrs. per week: _____
<u>VEHICLE INFO</u>	COPY OF VEHICLE REGISTRATION & DRIVERS LICENSE MUST BE ATTACHED	COPY OF VEHICLE REGISTRATION & DRIVERS LICENSE MUST BE ATTACHED
	Year _____ Make _____	Year _____ Make _____
	Model _____	Model _____
	State _____ Tag. No. _____	State _____ Tag. No. _____
	Color _____	Color _____

I understand that the Board of Directors of the Association and/or Consolidated Community Management Inc., their agent, may institute an investigation of my background (including credit, criminal and eviction reports) as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors, Consolidated Community Management, Inc. and First Advantage Resident Screening to make such investigation and agree that the information contained in this application and any attached documentation may be used in such investigation; and that the Board of Directors and Officers of the Association, Consolidated Community Management, Inc. and First Advantage Resident Screening shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors / Consolidated Community Management, Inc. or First Advantage Resident Screening.

I understand that false information given herein may constitute grounds for rejection of this application, denial of occupancy and/or forfeiture of any deposits.

Applicant's Signature: _____ Date: _____

Co-applicant's Signature: _____ Date: _____

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

ACKNOWLEDGEMENT 1 of 3

- I have received, read, understand, and agree to comply with the Rules & Regulations for this community. Under Florida Law, I understand it is the seller's responsibility to provide me with these items.
- The Governing Documents of the community are available at the management office for a cost of \$100.00 if the seller cannot provide them.
- I understand that the Rules & Regulations can be amended or changed for the association by the Board of Directors from time to time.
- I understand the application process can take up to 30 days, and agree I will not occupy the premises prior to my orientation and certificate of approval being issued.
- I understand that the closing date should not be scheduled prior to notification of the orientation date.
- **I understand the vehicle and parking restrictions for this community are as follows:**
 - I understand and agree – Maximum two (2) vehicles per unit and one (1) visitor decal.
 - Commercial trucks/vans are not allowed to be parked on this property.
 - This community may have parking restrictions that include, but are not limited to parking decals, guest parking passes and gate access devices. It is my responsibility to verify these restrictions before I or my guests enter the property with a vehicle.
- **I understand that the pet restrictions for this community are as follows:**
 - Pets (dogs) are required to be registered with the Association. Each resident who owns a pet must complete a pet registration form and provide a colored photo of such pet for the Association's files.
 - No animals are to be walked without a leash and pet owners should walk animals on the perimeter of the property and not on neighboring lawns. There is a City Ordinance regarding picking up after your dog, which must be obeyed.
 - Pets must NOT be tied outside in the front or rear of the residence. Pets should not be left unattended in the garage or on the back patio.
 - Failure to keep your pet from becoming a nuisance to others may result in having legal action to remove it permanently from the property.
- **I understand the occupancy restrictions for this community are as follows:**
 - Only the entire Home may be rented. Rent-sharing, the rental of rooms or less than the entire Home is prohibited. There shall be no subdivision or subletting of the Homes. Homes may only be occupied by tenants as a single family residence. The maximum number of tenants permitted to occupy a Home within the Association shall be two (2) persons for each bedroom of the Home. All leases shall be for a period of one (1) year. No Home may be subject to more than one (1) lease in any twelve (12) month period, unless approved in advance by the Board of Directors in its sole and absolute discretion.
- **I understand that should I lease my unit, the leasing restrictions are as follows:**
 - An Owner shall not lease the Home anytime within one (1) year of purchase. Owners who acquire title as a result of inheritance may lease the Home within the first year, so long as the lease and the occupancy contemplated by the lease, has been approved in advance in writing by the Board of Directors.
 - Board approval is required for all new leases and renewals.

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

Revised December 2017

ACKNOWLEDGEMENT 2 of 3

- Unit owner must be up to date and current on any monies or assessments due to the Association.
- Renewals must be submitted at least thirty (30) days prior to expiration of current lease.
- I understand there is a monthly maintenance fee due on the first of each month. Payments received after the 15th are considered late and are subject a \$25.00 late fee.
- I understand the association will send me payment coupons to make my payment. I further understand that I am responsible to make the maintenance payment from the date of closing regardless of whether I have received the coupons.
- I understand that the hours for moving of furniture either in or out are 8:00AM through 5:00PM Monday through Saturday. No moving will be permitted on Sundays or Holidays.
- I agree to provide within 2 business days of closing a copy of my warranty deed or a copy of the settlement agreement to Consolidated Community Management, Inc.

IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS please explain the circumstances regarding the situation on a separate piece of paper attached and attach to the application.

ALL APPLICANTS MUST ANSWER EACH QUESTION BELOW.	APPLICANT	CO-APPLICANT
1. Have you ever had an eviction filed against you?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Have you ever left owing money to any owner or landlord?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Have you ever applied for residency anywhere in the past 2 years, but did not move in?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Have you ever had adjudication withheld or been convicted of a crime?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

Revised December 2017

ACKNOWLEDGEMENT 3 of 3

Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, determination of occupancy approval, and / or forfeiture of fees or deposits.

I / we certify under penalty of perjury that I/we agree to and understand all items on these pages and in this application for occupancy.

Applicant Name Printed

Co-applicant Name Printed

Applicant Signature

Co-applicant Signature

Date

Date

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

Revised December 2017

PET VERIFICATION FORM

All parties listed on application MUST sign below

Complete and sign section A if you DO NOT own a pet

SECTION A:

Name: _____

Address: _____

Telephone number: _____

I DO NOT OWN A PET: _____

Applicant Signature

Co-applicant Signature

****YOU MUST RESUBMIT PET ACKNOWLEDGEMENT FORM IF AT ANY POINT IN THE FUTURE, YOU OR ANYONE RESIDING IN YOUR UNIT ACQUIRES A PET****

Complete and sign section B if you DO own a pet

SECTION B:

Name: _____

Address: _____

Telephone Number: _____

Type of pet (Breed): _____

Weight of pet: _____

Weight of pet at maturity: _____

Pet's name: _____

Pet's color: _____

Tag Number Broward County: _____

****YOU MUST INCLUDE PICTURE OF PET FOR IDENTIFICATION PURPOSES****

**** STATEMENT FROM VETERNARIAN CERIFYING BREED AND HISTORY OF SHOTS ARE REQUIRED****

Please remember all dogs are to be walked on a leash, the dog's owner is responsible for the removal of their dogs excretion.

By signing below I verify I have read and understand the above and will abide by the rules and regulations of the community. I agree to indemnify Monte Carlo Townhomes of Margate HOA, Inc. from damages and liability caused by the pet(s) listed above and any other pet(s) in the future that are within my unit.

Applicant Signature

Co-applicant Signature

INITIALS _____

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

Revised December 2017

RULES AND REGULATIONS

****INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED****

Revised December 2017