LIME BAY AT TAMARAC PHASE 4
9190 LIME BAY BLVD.
TAMARAC, FL. 33321
Office- 954-722-5090
Fax- 954-722-8600

APPLICATION PROCEDURES

PLEASE READ ALL PAGES BEFORE FILLING OUT.

Once an application has been filled and returned to the office it will take **3 to 4 weeks** before the applicant can be screened by Board of Directors.

Accompanied with the application, we will need a **MONEY ORDER** for **$100.00** made out to **Lime Bay Condominium Phase 4.**

Check list below; make sure everything is turned in with your application.

1. Sales contract must accompany application (NO FAXED COPIES PLEASE).
2. An approval letter from the Mortgage Company.
3. Copy of Proper Identification.
4. Person applying must be 55 years or older.
5. Children must be 18 year's or older.
6. Minimum Monthly Income $1,600.
7. 2 Year's Income Tax returns and 3 months Bank Statements.
8. 10% Down if you will have a Mortgage.
9. DOGS – YES – under 15 lbs. one dog per. unit.
10. Pet deposit of $200.00 and photo of dog (Money Order).
11. Move in deposit of $200.00 (Personal Check which is refundable upon moving in without damage to common area).
12. Three (3) reference letters.

Please make sure that you fill out all lines do not leave anything blank.

All applicants must be present at the time of screening.

Revised 02/20/2015

LIME BAY CONDOMINIUM ASSOCIATION
9190 LIME BAY BLVD.
TAMARAC, FL. 33321

ADDENDUM TO APPLICATION FOR PURCHASE

1. NO newly purchased condominium unit may be rented or otherwise allowed to be occupied by ANYONE other than the ORIGINAL purchasers for the first eighteen (18) months of ownership.

2. After the first eighteen (18) months of ownership, should the need arise to rent or lease a unit, the ASSOCIATION requires an application to be submitted for approval. NO OCCUPACY of the said unit shall take place without the SIGNED APPROVAL of the Board of Directors.

3. A non-refundable fee of $100.00 made payable to LIME BAY CONDOMINIUM ASSOCIATION PHASE must accompany the application.

4. Should the application to rent or lease said condominium be approved, the applicant shall be advised to this effect. Prior to receiving the Board of Directors written approval, the applicant MUST post a FIVE HUNDRED ($500.00) refundable Security DEPOSIT with the Association made payable to Lime Bay Condominium Association.

5. Approval for the rental or lease agreement is REQUIRED from the Board of Directors. The unit owner and/ or the tenant must contact the Association one month prior to the expiration of the approved agreement to obtain a renewal approval.

6. The renters must present verifiable proof that one of the residents be at least (55) fifty five years of age, and NO ONE under the age of (18) eighteen years can reside in the community on a permanent basis. Any visiting child can stay for a two week visit.

IN WITNESS, I/WE ACKNOWLEDGE THIS ADDENDUM TO THE APPLICATION FOR PURCHASE DATED THIS _____ DAY OF _____

Witness _____ Applicant _____

Witness _____ Applicant _____

Building #_____ Unit # _____

Notary Required _____ Date _____

Phoenix

Management Services, Inc.

We Manage to Make Your Life Easier

To Whom It May Concern:

Please be advised that as of January 2014, a charge of $275.00 is required by our Management Company to fill out all estoppels and/or questionnaires. Rush fee charge of $350.00, the turn over time is 24 hours.

All payments are accepted with money order, cashiers check or cash. Money Orders and cashiers check are to be made payable to Phoenix Management Services, Inc. Payment is to be mailed with the request to Phoenix Management Services, Inc. at 4800 N State Road 7 Suite 105 Lauderdale Lake, FL 33319.

The turn over time is 24 to 48 hours, the request will be faxed, mailed or both if requested.

Thank you for your cooperation regarding this matter.

PHOENIX MANAGEMENT SERVICES, INC.

Mabel A. Presta
Estoppel Department

member community associations institute

BBB.

Lime Bay Community Association
9190 Lime Bay Blvd.
Tamarac, Fl. 33321

INFORMATION SHEET

1. Visitors are to be told not to bring pets.

2. If you have a car you will be assigned one (1) parking space.

3. No backing into parking spaces.

4. If you get rid of your car, your space may be assigned to someone else.

5. Newspapers must be placed in recycle bin on the first floor.

6. Bottles, plastic, etc. must be placed must be placed in recycle bin in the garbage room on the first floor.

7. Garbage must be in plastic bags before disposing of it.

8. Cartons must be broken down before being placed in garbage receptacles.

9. No large items may be placed in garbage room or on catwalks. **(THEY MUST BE TAKEN AWAY AT YOUR OWN EXPENSE.)**

10. Any workers that do work in your apartment must clean up the catwalk and other places they dirty and must not throw debris in dumpster.

11. No loud radio, TV or other noise after 11:00 p.m.

12. No mats, flower pots or any other material is to be placed on catwalks.

13. No private plantings outside of patios.

14. No barbecuing on terrace or outside.

15. No washers or dryers in apartments.

16. Any damage done by you or anyone servicing you must be promptly reimbursed.

17. Maintenance payments are due the 1st of the month after the 10th of the month there will be a late fee charge of $25.00 that will not be forgiven.

18. Guests are not allowed to bicycle, skate or play ball in parking lots.

19. Visiting babies in diapers are not allowed in pool and no one under 16 years of age is allowed in the Jacuzzi, even when supervised.

20. No repainting of outside of apartment in any other color but original, and no change of design of outside door except the ones on the tenants doors.

21. Nothing is to be displayed on doors or windows or cars including "FOR SALE" signs.

22. No commercial vehicles, trucks, boats, trailers, motor homes, mobile homes, campers, recreational vehicles, motorcycles, mopeds, etc. permitted to park on the premises overnight.

23. All necessary requested paper work including "Information sheet" will be filled out completely and promptly returned to the office.

24. You must obey all Rules and Regulations.

I (WE) HAVE READ PAGES 1 & 2 OF INFORMATION SHEET RULES AND REGULATIONS AND WILL ABIDE BY THEM.

_____ _____

WITNESS **APPLICANT**

_____ _____

WITNESS **APPLICANT**

STATE OF:_____ **COUNTY OF:**_____

DATED THIS _____ **DAY OF** _____ **20**___.

_____ _____

NOTARY REQUIRED **DATE**

STAMP:

RELEASE OF INFORMATION AND AUTHORIZATION OF APPLICATION
UNMARRIED CO-APPLICANTS MUST FILL OUT A SEPARATE RELEASE

NAME _____ SS# ____-____-____ DOB__/__/____

SPOUSE _____ SS#____-____-____ DOB__/__/____

PRESENT ADDRESS

_____
STREET CITY STATE ZIP CODE

PLEASE PROVIDE A PREVIOUS ADDRESS IF YOU HAVE LIVED AT YOUR CURRENT ADDRESS FOR LESS THAN 24 MONTHS.

_____
STREET CITY STATE ZIP CODE

HAVE YOU EVER HAD AN EVICTION AGAINST YOU?
APPLICANT: YES ____ NO ____ SPOUSE: YES ____ NO ____

HAVE YOU EVER LEFT OWING MONEY TO ANY OWNER OR LANDLORD?
APPLICANT: YES ____ NO ____ SPOUSE: YES ____ NO ____

HAVE YOU APPLIED FOR RESIDENCY ANYWHERE IN THE LAST 2 YEARS, BUT DID NOT MOVE IN?
APPLICANT: YES ____ NO ____ SPOUSE: YES ____ NO ____

HAVE YOU EVER HAD AN ADJUDICATION WITHHELD OR BEEN CONVICTED OF A CRIME?
APPLICANT: YES ____ NO ____ SPOUSE: YES ____ NO ____

IF YOU HAVE ANSWERED YES TO ANY OF THE ABOVE QUESTIONS PLEASE EXPLAIN IN DETAIL THE CIRCUMSTANCES REGARDING THE SITUATION ON THE BACK OF THIS SHEET. APPLICATE(S) REPRESENTS THAT ALL OF THE ABOVE STATEMENTS INFORMATION ON THE APPLICATION FOR SALE/LEASE ARE TRUE AND COMPLETE, AND HEREBY AUTHORIZES AN INVESTIGATIVE CONSUMER REPORT AND VERIFICATION OF ANY AND ALL INFORMATION RELATING TO RESIDENTIAL HISTORY (RENTAL OR MORTGAGE) EMPLOYMENT HISTORY, CRIMINAL HISTOR' RECORDS, COURT RECORDS AND CREDIT RECORDS. APPLICANT ACKNOWLEDGES THAT FALSE ORMITTED INFORMATION HEREIN MAY CONSTITUTE GROUNDS FOR REJECTION OF THIS APPLICATION, TERMINATION OF OCCUPANCY AND/ OR FORFEITURE OF FEES OR DEPOSITS AND MAY CONSTITUTE A CRIMINAL OFFENSE UNDER THE LAWS OF THIS STATE. I/WE HEREBY RELEASE ASAP AND ANY OF THE ABOVE FROM ANY LIABLITY AND RESPONSIBILITY ARISING FROM THEIR DOING SO. FACSIMILES OF THIS AUTHORIZATION MAY BE USED TO FACILITATE MULTIPLE INQUIRIES. IN THE EVENT YOU RECEIVE FACSIMILE OF THIS AUTHORIZATION, IT SHOULD BE TREATED AS AN ORIGINAL AND THE REQUESTED INFORMATION SHOULD BE RELEASED TO FACILITATE MY/OUR APPLICATION FOR RESIDENCY.

_____ _____
APPLICANT SIGNATURE DATE

_____ _____
APPLICANT SIGNATURE DATE

LIME BAY CONDOMINIUM ASSOCAIATION. PHASE# 4 APPLICANT SCREENING AND PROCESSING

LIME BAY #4 CONDOMINUM ASSOCIATION

PET REGISTRATION FORM

Pet Owner's Name: _____ Unit: _____

Address: _____ Owner: _____ Tenant: _____

Home Phone No.: _____ Cell Phone No.: _____

Breed of Pet: _____

Name of Pet: _____ Male or Female: _____

Approximate Weight of Pet: _____ Color of Pet: _____

Veterinarian's Name: _____

Please attach a certification from the veterinarian on how much the pet weighs and that it has had all its required shots.

I understand that I am fully responsible and liable for the actions of my pet. I also understand Lime Bay #4 Condominium Association's governing documents and rules and regulations regarding the control of my pet. I agree that if the Board notifies me that my pet has repeatedly been in violation of the Association's governing documents and/or Pet Rules, I will remove my pet permanently from Association property:

_____ _____

Owner/Tenant Signature Date:

Having a pet at Lime Bay #4 is a PRIVILEGE and not a right, and this privilege may be revoked by the Association at any time.

LIME BAY PHASE #4 – 55 and OVER CENSUS 2015

The condominium unit located at the below address, being part of Lime Bay Condominium, Inc. #4 Is occupied by at least One (1) person 55 years or older, as called for under the Federal Fair Housing Act 42 USC 3607[b] [2] [c].

Address _____

Bldg. # _____ Unit # _____

Occupant over 55 years of age: _____
Print Name

Date of Birth: _____
Print date of birth of person over 55 years.

Date: _____ _____
Print date Signature of person certifying the above

_____
Print name of person certifying the above

IMPORTANT NOTICE

THE ASSOCIATION IS REQUIRED BY LAW TO OBTAIN PROPER IDENTIFICATION FOR THE PERSON OVER 55 IN EACH CONDOMINIUM (PERSON LISTED ABOVE).

The Lime Bay Clubhouse Office is able to make copies of driver's license, passports Or actual birth certificates, etc. to fulfill this legal requirement.

THIS COPY OF PROPER INDENTIFICATION MUST BE SUBMITTED WITH THIS 55 & OVER CENSUS IN EACH CONDOMINIUM (PERSON LISTED ABOVE).

IF YOU HAVE ANY QUESTIONS REGARDING THE ABOVE CENSUS, PLEASE CONTACT THE ASSOCIATION BY CALLING THE OFFICE AT (954) 722-5090.

Lime Bay At Tamarac
Phase 4
9190 Lime Bay Blvd.
Tamarac, FL. 33321

PHASE 4 CENSUS INFORMATION

1. DATE_____ BLDG#_____ UNIT#_____

2. OWNER NAME_____

3. RENTER NAME IF APPLICABLE_____

4. PERSONS RESIDING IN CONDO: MUST HAVE ONE PERSON OVER 55 YEARS OF AGE AS A RESIDENT. MAXIMUM OF FOUR PERSONS.

	NAME	AGE
A.	_____	_____
B.	_____	_____
C.	_____	_____
D.	_____	_____

COPIES OF RESIDENTS DRIVERS LICENSE ATTACHED?

YES _____ NO _____

5. COMMENTS:

_____ _____

INTERVIEWER SIGNATURE DATE

LIME BAY #4

AFFIDAVIT

In Reference to:

Condominium Unit # _____ of Building _____, _____Lime Bay Blvd. Tamarac, Florida 33321 a Condominium, according to the Declaration of Condominium thereof, recorded in Official Records Book 5830 at Page 73 of the Public Records of Broward County, Florida.

This affidavit is made to persuade Lime Bay Condominium, Inc. #4, the operating entity, to approve our purchase of the above described Condominium.

Applicants, in seeking approval to purchase a Condominium unit at Lime Bay Condominium, Inc. #4, A/K/A/ Lime Bay Phase 4, acknowledge that the Condominium Association is defined as "**Housing for Older Persons**" **42 USC 3607 [b] [2] [c].**

It is fully understood and we agree to abide with the requirement, that when occupied, the above unit MUST at all times be occupied by at least one person 55 years of age or older. No person under the age of sixteen (16) years of age may permanently reside in the Association.

Dated: This _____ day of _____, 20_____.

Applicant: _____ Applicant: _____

STATE OF: _____

COUNTY OF: _____

The foregoing Affidavit was acknowledged before me this _____ day of _____, 20_____ by

_____, _____, who is personally known to me or who has produced

_____ as identification.

_____ My Commission Expires: _____
Notary Signature

Stamp:

Lime Bay #4 Condominium Association
Pet Rules
(Effective July 7, 2010)

1. All dogs residing in Lime Bay #4 Condominium Association must be registered with the Association and must be in full compliance with all Pet Rules in force by the Association. Registration forms may be obtained at the reception desk at the clubhouse. A photo of the dog will be required for registration.
2. All dogs residing in Lime Bay #4 prior to July 7, 2010, will be approved and grandfathered in, regardless of their weight, providing they are registered with the Association and in compliance with all Pet Rules.
3. All new applications for dogs desiring to be brought onto Association property will be considered for approval upon the posting of a refundable $200.00 Pet Security deposit and the registration of the dog with the Association. Approval of the Association to maintain a dog on Association property will be extended on the stipulation that the dog will at all times be maintained in full compliance with all Pet Rules in force by the Association. The refundable Pet Security deposit MUST remain with the Association until that time when the dog is no longer in residence on Association property.
4. Maximum of one (1) dog per condominium unit.
5. Maximum adult dog weight is eighteen (18) pounds, as attested to by a veterinarian. This size restriction does not apply to those dogs granted grandfather status.
6. The dog must have received all required shots, as attested to by a veterinarian.
7. Dogs MUST be maintained on a leash at all times when on Association property.
8. Dogs are to be held while in elevators or taken off if other passengers are present.
9. All animal excrement must be picked up and deposited in appropriate receptacles.
10. Guests are NOT allowed to bring dogs onto Association property.
11. The Association reserves the right to rescind approval in instances of excessive noise or repeated violation of these Pet Rules. Owners assume full responsibility for their dogs in instances of personal bodily injury or damage to Association property and the Association reserves the right to require offensive dogs to be removed from the property.
12. Domestic (indoor) house cats or birds do not require Association approval and are allowed in Lime Bay #4 Condominium Association, providing they are kept inside at all times. NO OTHER DOMESTIC OR EXOTIC PETS OR ANIMALS ARE ALLOWED.
13. NO dogs are allowed on any of the common property of Lime Bay #4 and/or Lime Bay Community (clubhouse, pool areas, tennis courts, etc.).
14. VIOLATION AND FINES: All documented violations of the Pet Rules currently in force by the Association will be handled in the following manner:
    - First documented violation — Warning Letter
    - Second documented violation — $ 50.00 Fine
    - Third or more documented violations — $100.00 Fine

The failure of an owner to seek approval of a dog prior to allowing the dog onto Association premises is prohibited. All owners must comply with the above mentioned rules or the dog will be subject to removal.

LIME BAY CONDOMINIUM, INC.
9190 LIME BAY BLVD.
TAMARAC, FL. 33321

PHASE _____
BLDG. _____
UNIT _____

AN AGE 55 OR OLDER RESIDENTIAL COMMUNITY

APPLICATION FOR PURCHASE, TRANSFER, GIFT, OR INHERITANCE APPROVAL

1. This application, an application for approval, and authorization forms must be completed in detail by each proposed adult occupant, other than husband/wife or parent/dependent child (which is considered one applicant).
2. If any question is not answered or left blank, this application will be returned, not processed and not approved.
3. Please attach a copy of the sales contract to this application.
4. Please attach a non-refundable processing fee of $100.00 to this application, made payable to LIME BAY CONDO. PHASE # 4 for each applicant, other than husband/wife or parent/dependent child (which is considered one applicant). Please include the building #, unit # and Phase # on the check. Acceptance of the processing fee does not in any way constitute approval of this transaction.
5. The completed application must be submitted to the Association office at least 20 days prior to the expected closing date.
6. All applicants must make themselves available for a personal interview prior to final Board of Directors approval. Occupancy prior to Board approval is prohibited.
7. LIME BAY CONDOMINIUM, INC. is a community designed and intended to provide housing for residents who are age 55 or over. No permanent occupancy of any unit is permitted by a person under age 18. In addition, units must be permanently occupied by at least one personage 55 or over.
8. ~~No pets allowed at any time.~~
9. Use of this unit is for single family residence only. No corporation, company, partnership or trust may purchase a unit.
10. No commercial vehicles, trucks, boats, trailers, motorhomes, mobilehomes, campers, recreational vehicles, motorcycles, mopeds, etc. permitted to park on the premises overnight. ONLY ONE ASSIGNED PARKING SPACE AVAILABLE PER. UNIT.
11. The seller (current owner) must provide the purchaser with a copy of all Association Documents and Rules & Regulations otherwise; you must purchase them from the Association for $10.00.
12. Purchaser must notify the Association with the exact date of their closing 954-722-5090. A Certificate of Approval will be made up and given to the buyer in recordable form. It is important that the Management Office be notified as to where to send this Certificate.
13. Occupancy regulations:
One bedroom unit – no more than 2 occupants.
Two bedroom unit – no more than 4 occupants.

MUST PRINT OR TYPE ALL INFORMATION ON THESE FORMS

Date_____ Bldg. No. _____ Unit No. _____ Approx. Closing Date _____

Owner's Name _____ Telephone No. _____

Owner's Present Address _____

Name of Realtor Handling Sale _____

NAME OF PROSPECTIVE PURCHASER (AS TITLE WILL APPEAR)

A. _____ B. _____ (Spouse)

MORTGAGE INFORMATION: (IF UNIT WILL BE MORTGAGED):

Name of Lender _____ Telephone No. _____

Address _____

OTHER PERSONS WHO WILL OCCUPY THE UNIT WITH YOU.

Name	Age	Relationship/Occupation

PLEASE READ CAREFULLY

PRINT OR TYPE

Have you ever seasonally resided in Florida before? _____ if yes, please state the name, address and dates of residency:_____

_____

_____

If retired, please state the company's name and address retired from and when retired:

_____

_____

_____

Have you ever been convicted of a crime? _____ If yes, please state the date(s), charge(s) and disposition(s):_____

_____

_____

1. I hereby agree for myself and on behalf of all persons who may use the unit which I seek to Lease or Buy.

a. I will abide by all of the restrictions contained in the Bylaws, Rules & Regulations, and restrictions which are or may in future be imposed by LIME BAY CONDOMINIUM.

a. I understand that there is a restriction on pets and that I may not bring a pet into LIME BAY, nor acquire one, either temporarily or permanently after occupancy.

c. I understand that I must be present when any quests, relatives, visitors, or children who are not permanent residents occupy the unit or use the recreational facilities.

d. I understand that sub-leasing or occupancy of this unit in my absence is prohibited.

e. I understand that any violation of the terms, provisions, conditions, and covenants of the LIME BAY CONDOMINIUM documents provides cause for immediate action as therein provided or termination of the leasehold under appropriate circumstances.

2. I have received a copy of the Rules & Regulations: Yes ____ No _____

3. I understand that I will be advised by the Board of Directors of either acceptance or denial of this application.

4. I understand that the acceptance for Lease or Sale at LIME BAY CONDOMINIUM is conditional in part upon the truth and accuracy of this application and approval of the Board of Directors. Any misrepresentation or falsification of information on these forms will result in the automatic disqualification of my application. Occupancy prior to the Board of Directors approval is prohibited.

5. I understand that the Board of Directors of LIME BAY CONDOMINIUM may cause to be instituted an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors, Management and A.S.A.P. to make such investigation and agree that the information contained in this and the attached application may be used in such investigation, and that the Board of Directors, Officers and Management of LIME BAY CONDOMINIUM itself 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.

I further agree that the time for acting on this application shall not begin to run until the Board of Directors has received the report from Management.

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

IN WITNESS WHEREOF, I/WE have executed the foregoing application this

_____ Day of _____, _____.

WITNESSED _____ APPLICANT_____

WITNESSED _____ APPLICANT_____

OWNER NAME _____ UNIT # _____

NEW OWNER/RENTER ADDRESS_____

_____

INSTRUCTIONS:
1 - Applicants are not legally married, an application on each person must be completed.
2 - Print legibly or type all information. Account and telephone numbers and complete addresses are required.
3 - If any question is not answered or left blank, this application may be returned, not processed or not approved.
4 - Missing information will cause delays in processing your application.
5 - Only the applicants are authorized to sign all forms.
6 - Any misrepresentation or falsification of information may result in your disqualification.

APPLICATION FOR OCCUPANCY/APPROVAL

PRINT OR TYPE

Purchase_____ or Lease_____ *(How Long)*

Apt. No._____ Bldg. No._____ Special Address of Unit_____

Date_____ 20_____ Desired date of occupancy _____

Name_____ Date of Birth_____ Soc. Sec No._____
(Passport, Alien, Green Card, Social Insurance No.)

Spouse_____ Date of Birth_____ Soc. Sec. No._____
(Passport, Alien, Green card, Social Insurance No.)

[ ] Sngl. [ ] Married [ ] Window(er) [ ] Sep._____ *(How Long)* [ ] Div._____ *(How Long)* Maiden Name _____

Number of people who will occupy. Adults (over age 18)_____ Children (over 18)_____ Children (under 18)_____

Names & ages of children who will occupy:_____

Description of Pets (Breed, Size, Color, Weight, Etc.) _____

In case of emergency notify:_____
Name *Address* *Telephone*

PRINT OR TYPE

RESIDENCE HISTORY

A. Present Address_____ Phone ( )_____
(Street Address, Apt No., City, State, Zip)

Name of Apt./Condo_____ Phone ( )_____ Dates of Residency _____

Name of Landlord or Mortgage Co._____ Phone ( )_____

Address_____ Mtg. No._____

B. Previous Address_____ Your Apt. No._____
(Street Address, Apt. No., City, State, Zip)

Name of Apt./Condo_____ Phone ( )_____ Dates of Residency_____

Name of Landlord or Mortgage Co._____ Phone ( )_____

Address_____ Mtg. No._____

C. Prior Address_____ Your Apt. No._____
(Street Address, Apt. No. City, State, Zip)

Name of Apt./Condo_____ Phone ( )_____ Dates of Residency_____

Name of Landlord or Mortgage Co._____ Phone ( )_____

Address_____ Mtg. No._____

PRINT OR TYPE

EMPLOYMENT & BANK REFERENCES

A. Employed By (Business Name)_____ Phone ( )_____
(or retired from)

How long_____ Dept. or Position_____ Mo. Income_____

Address_____ Zip_____

B. Spouse's Employment (Business Name)_____ Phone ( )_____
(or retired from)

How long_____ Dept. or Position_____ Mo. Income_____

Address_____ Zip_____

C. Bank Reference_____ Phone ( )_____

How Long_____ Ck. Acct. No._____ Sav. Acct. No. _____

Address_____ Zip_____

D. Bank Reference_____ Phone ( )_____

How Long_____ Ck. Acct. No._____ Sav. Acct. No._____

Address_____ Zip_____

PRINT OR TYPE

CHARACTER REFERENCES

1. _____ Res. Phone ( )_____ Ofc. Phone ( )_____

Address_____ Zip_____

2. _____ Res. Phone ( )_____ Ofc. Phone ( )_____

Address_____ Zip_____

3. _____ Res. Phone ( )_____ Ofc. Phone ( )_____

Address_____ Zip_____

Driver's Lic. No. #1_____ #2_____ State_____

Make_____ Model_____ Year_____ Plate No._____ Color_____ State_____

Make_____ Model_____ Year_____ Plate No._____ Color_____ State_____

If this application is NOT legible or is not completely and accurately filled out, Renters Reference of Florida, Inc. (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.
By signing, the applicant recognizes that the Association or their agent, Renter Reference of Florida, Inc. 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, personal characteristics, credit standing, police arrest record and mode of living as applicable. I may request, in writing, within a reasonable time, a complete and accurate disclosure of the nature and scope of any investigation.

Signature_____ Signature_____
Applicant *Applicant's Spouse*