APPLICATION FOR LEASE MINIMUM THREE (3) MONTHS ONE FAMILY ONLY

OceanTree Condominium Association, Inc. 3400 North Ocean Drive Singer island, FL 561-845-6050 APPLICATION FOR OCCUPANCY/APPROVAL

INSTRUCTIONS: 1. Applicants not legally married must complete an application on each person.

Please note an additional application fee will apply.

- 2. Print legibly or type all information. Account, 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.
- 7. A check for \$100.00 must be attached to this Application.
- 8. Applications for Sale/Lease must be turned in to Management Office and appointment made for interview at time of application. Applications will NOT be effective until approved by Sales/Leasing Committee.
- 9. All applications require the following ID to be included: Driver License / Social Security Card.

UNIT #: ______

PRINT OR TYPE Purchase: _____ Lease: ____ How Long? : _____

Date ____ 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.)

		City,	State,
Married	Widow(er)Sep	Divorced Maiden Name:	
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	EMPLOYMENT & BANK REFERENCES
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Address	
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Spouses	Employment
Busines	s Name
Address	
Phone 1	10
	ng?Dept. or Position
Mo. Inc Are you	ome currently on Active Duty in the Military? (U.S. Armed Forces, State, Florida National Guard o serve Forces)
	Yes No
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	CHARACTER REFERENCES
1.	CHARACTER REFERENCES Name Phone
1.	
	Name Phone

DRIVERS LICENSE - VEHICLE INFORMATION

Drivers Lic. No. 1		
Vehicle #1 Make ——— Model		Year
Color ———————————————————————————————————	State	
Drivers Lic. No. 2		
Vehicle #2 Make		
Model		Year
Color	Plate No.	State
Signature		
	ble OceanTree to kee	ep their records up to date, n this form to the Office
	Emergency In	formation Form
Name Unit#	,	
Unit Phone #		
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Unit Fax #

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Away Fax #	
	NT
	Name of others who may have your apartment key
Name	
Address	
Phone #	
MIGHT STATEMENT AND	
	Emergency Contact

OCEANTREE CONDOMINIUM MUST HAVE A COMPLETE SET OF KEYS TO YOUR APARTIVÆNT FOR ENERGENCIES BROWN'S BACKGROUND CHECKS CONSENT TO OBTAIN CONSUMER REPORT ON SUBSCRIBER

OceanTree Condominium Association Inc

I understand that you may obtain consumer reports that relate to my credit and/or criminal history. This information will, in whole or in part, be obtained from AISS, a Sterling Infosystems Company, 6111 Oak Tree Blvd, 4th floor, Independence, OH 44131, telephone 800.853.3228. I understand that you may be requesting information from various federal, state and other agencies or institutions, which maintain public and non-public records concerning my past activities relating to my credit and/or criminal history. This information will be reviewed by the Association and may be reviewed by a unit owner if it's a rental.

or institutions, which maintain public and non-public records concerning my past activities relation to my credit and/or criminal history. This information will be reviewed by the Association a may be reviewed by a unit owner if it's a rental.				
I authorize, without reservat above-mentioned information	tion, any party, institution, or agency on:	y contacted by AISS to furnish the		
Applicant Name	Date of Birth* *Date of Birth is requested in order to	Social Security Number obtain accurate retrieval of records.		
	1 1			
Co-Applicants Name	Date of Birth	Security Number		
Alias/Previous Name(s)				
Current Physical Address	City & State	Zip code		
	ta & Oklahoma Applicants Only: Pl t sent directly to you.	ease check here to have a copy of		
identification, the nature and information, and the recipients year period preceding your re business hours. You may also	pplicants California Civil Code, you have the risubstance of all information in its file of any reports on you, which AISS has quest. You may view the file maintai obtain a copy of this file upon submitties. Upon making a written request, you	es on you, including the sources of previously furnished within the two- ned on you by ASS during normal ing proper identification and paying		
SIGNATURE	p_{ℓ}	TE statistissa talanan ja ki si sa ta		

Co-Applicant	
SIGNATURE	DATE
I/We, the undersigned have receive OceanTree Condominium Associa	ed and read the Rules & Regulations from tion.
Name	Date
Name:	Date:

RESOLUTION OF THE BOARD OF DIRECTORS OF . OCEANTREE CONDOMINIUM ASSOCIATION, INC. .

A meeting of the Board of Directors of OCEANTREE CONDOMINIUM ASSOCIATION, INC. was held;

On call, a quorum was found to be present.

On motion duly made and seconded, the following Resolution was passed:

RESOLVED, that the following rule shall be adopted concerning the assignment of rent:

As a condition for lease approval, the Unit Owner and Lessee shall agree to the following: In the event the Unit Owner is delinquent in the payment of any assessment for more than thirty (30) days, the Association may notice/ the Lessee of the delinquency and in such event, the Lessee shall be obligated to commence paying all future rent payments to the Association, until the delinquent assessments and related charges are paid in full to the Association. At such time, the Lessee shall resume paying rent to the Unit Owner. During the period of time that the Lessee is paying his-rent to the Association, the Unit Owner may not evict the Lessee for non-payment of rent. However, if the Lessee does not pay the rent to the Association as required herein, the Association shall have the authority to evict the Lessee. In such an event, the Unit Owner shall be obligated to reimburse the Association for the costs and attorney's fees incurred by the Association.

OCEANTREE ASSOCIATION, INC.

CONDOMINIUM

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BY:

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