

Garden Isle Villas COA, Inc

PURCHASE/RENTAL INFORMATION INSTRUCTIONS:

This application is subject to approval. Please complete and submit with all required documentation to:

GARDEN ISLE VILLAS COA, INC.
C/o Allied Property Management Group, Inc.
1711 Worthington Rd. Ste 103
West Palm Beach, FL 33409

Please note: applications must be turned in complete. All must check / initial next to each item above to ensure you are submitting all required documentation prior to mailing or dropping off.

Please note: if purchasing under a business entity the application must be filled out with said person as signer for such business entity. Proof of authorized signer required such as a print out from Sunbiz.org.

- 1) _____ A non-refundable application fee in the form of money order or cashier's check in the amount of \$150.00 (per applicant, 18 years of age or older) made payable to: **ALLIED PROPERTY MANAGEMENT GROUP, INC.** Married couples eligible to only \$150.00 fee (marriage certificate may be requested).
 - **Please note:** An additional hundred (\$250.00 total - made payable to: **ALLIED PROPERTY MANAGEMENT GROUP, INC.**) is required per applicant if of Foreign nationality and holds no U.S. Social Security Number.
- 2) _____ **RENTALS Only** Deposit of \$1000 for common areas in the form cashier's check or money order made payable to: **Garden Isle Villas COA, Inc.**
 - Owner must provide purchaser with a copy of all condominium documents and lessees with a copy of all rules and regulations.
- 3) _____ Legible copy of each applicant's valid DL or government issued picture ID.
- 4) _____ Legible copies of all vehicle registrations that will be parked in the community.
- 5) _____ Signed APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION form and Acknowledgement of the Rules & Regulations
- 6) _____ Executed copy of the Purchase Agreement or Signed Lease Agreement.

***PLEASE do not schedule closing or occupy until you have been approved by the board and issued a certificate.**

*Applicant(s) will be contacted once the board has made a decision. If you have not heard anything after 14 days, you may follow up via email to: applications@alliedpmg.com Please include the following subject line (GIV/ Applicants Last Name – Property address) in your email(s).

APPLICATIONS FOR LEASE WILL NOT BE CONSIDERED FOR APPROVAL, IF THE UNIT OWNER HAS AN OUTSTANDING BALANCE OR PENDING VIOLATIONS WITH THE ASSOCIATION.



GIV

PROPERTY ADDRESS: _____

Applicant 1

Name: _____ Maiden Name: _____

DOB: _____ Social Security: _____ - _____ - _____ Phone1: _____

Phone2: _____ Email: _____

Driver's License Number: _____ State: _____ Current Rent: _____

Current Address: _____ How Long: _____

Landlord: _____ Ph: _____ Reason for Moving: _____

Previous Residence 1: _____

How Long: _____ Reason for moving: _____ Landlord: _____

Development/Community: _____ Contact: _____ Phone: _____

Current Employer: _____ Ph: _____ Income: _____

Address: _____ Supervisor: _____

Previous Employer: _____ Ph: _____ Income: _____

Addr: _____ Supr: _____ Reason for Leaving: _____

Applicant 2

Name: _____ Maiden Name: _____

DOB: _____ Social Security: _____ - _____ - _____ Phone1: _____

Phone2: _____ Email: _____

Driver's License Number: _____ State: _____ Current Rent: _____

Current Address: _____ How Long: _____

Landlord: _____ Ph: _____ Reason for Moving: _____

Previous Residence 1: _____

How Long: _____ Reason for moving: _____ Landlord: _____

Development/Community: _____ Contact: _____ Phone: _____

Current Employer: _____ Ph: _____ Income: _____

Address: _____ Supervisor: _____

Previous Employer: _____ Ph: _____ Income: _____

Addr: _____ Supr: _____ Reason for Leaving: _____

OTHER OCCUPANTS THAT WILL RESIDE WITH YOU

Please Note: Anyone over 18 YOA needs to be listed as a Co-applicant and not listed below.

Name	DOB	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

Pets: If applicable please submit a photograph of all pets with this application.

Type: _____ Breed: _____ Weight: _____ Age: _____
 Type: _____ Breed: _____ Weight: _____ Age: _____

Vehicles to be Parked at Residence – Please include clear copy of current registration.

Vehicle #1: Make: _____ Model: _____ Tag#: _____ Yr: _____
 Vehicle #2: Make: _____ Model: _____ Tag#: _____ Yr: _____

References (Not Related)

Name: _____ Address: _____
 Relationship: _____ Phone: _____
 Name: _____ Address: _____
 Relationship: _____ Phone: _____

Has any applicant ever been: Evicted Lost part/all security deposit Had lease terminated
 Give detail: _____

Emergency Contact

Name: _____ Address: _____
 Relationship: _____ Phone: _____

I (we) agree to abide by the Declaration of Covenants, Conditions and Restrictions and Amendments thereto, of the governing Association.
 I (we) fully authorize an investigation, if necessary, of all answers and references given. Accordingly, I specifically authorize Allied Property Management Group, Inc., its principals, managers or agents to make such investigation and agree that the information contained in this application may be used in such investigation and Allied Property Management Group, Inc., its principals, manager or agents 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 Allied Property Management, Inc., its principals, managers or agents.

I (we) understand that should the landlord enter into a lease with me (us), and I have provided false information on this application, I (we) will be subject to having my (our) lease terminated at the landlord's option, and have my (our) full security deposit forfeited as compensation for damages.

Notice: Unless agreed otherwise in writing, the Property remains on the market until a lease is signed and Landlord may continue to show the Property to other prospective tenants and accept another offer.

 Signature of Applicant: Signature of Applicant: Date:



APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

This release and authorization acknowledges that **Allied Property Management Group, Inc.**, may now, or any time while I own or I am renting, conduct a verification of my current and previous tenant history, current and previous employment, credit history, contact personal references, and to receive any criminal history information pertaining to me which may be in the files of any Federal, State, or Local criminal justice agency, and to verify any other information deemed necessary to fulfill the Owner/Tenant requirements. The results of this verification process will be used to determine Owner/Tenant eligibility under **Allied Property Management Group, Inc.**, tenant policies.

I/We authorize **Active Screening** and any of its agents, to disclose orally and in writing the results of this verification process to the designated authorized representative **Allied Property Management Group, Inc.** These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks.

I/We have read and understand this release and consent, and I authorize the background verification. I authorize persons, schools, current and former employers, current and former landlords and other organizations and Agencies to provide **Active Screening** with all information that may be requested. I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original. You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Company and Active Screening 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618; Phone: 1-800-319-5580. For information about Active Screening's privacy practices, see www.activescreening.com.

ACKNOWLEDGEMENT AND AUTHORIZATION

By signing below, I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by the Company at any time after receipt of this authorization.

Applicant Signature: _____ Date: _____

Print Name: _____ Last Four Digits of SSN: _____ If No US SS# fill out below:

FOREIGN CITY/PROVIDENCE/COUNTRY OF BIRTH: _____ PASSPORT # _____

Co- Applicant Signature: _____ Date: _____

Print Name: _____ Last Four Digits of SSN: _____ If No US SS# fill out below:

FOREIGN CITY/PROVIDENCE/COUNTRY OF BIRTH: _____ PASSPORT # _____

Co- Applicant Signature: _____ Date: _____

Print Name: _____ Last Four Digits of SSN: _____ If No US SS# fill out below:

FOREIGN CITY/PROVIDENCE/COUNTRY OF BIRTH: _____ PASSPORT # _____

GARDEN ISLE VILLAS CONDOMINIUM

RULES AND REGULATIONS

1. Owners and tenants must park in their assigned parking space. Only the marked guest parking shall be used for guests and overflow parking. No parking spaces may not be used for storage of any vehicles not in use. All vehicles **MUST** display current license plates. Vehicles belonging to other than occupants may not be stored on the premises and will be towed at the owner's expense. Parking is **NOT** permitted in the unmarked space directly in front of each entrance gate. These spaces are only to be used for loading and unloading and for emergency vehicles. Violation is subject to the immediate removal of vehicle at the vehicle owner's expense. **NO PARKING IN FRONT OF THE DUMPSTER! VIOLATORS WILL BE TOWED!**
2. Stairs, walkways and electrical rooms shall remain free and clear of all material.
3. Personal property must be stored with the unit or storage room.
4. Screened patios are to be kept neat and orderly. Patio furniture, plants, neutral (beige, white or wood colored) blinds are permitted.
5. All complaints are to be submitted to the Board in writing. The Board must respond within thirty (30) days of complaint (F.S 718.112) The Board will respond to one (1) inquiry per unit in any thirty (30) day period.
6. Rules posted at the pool shall be observed. No glass containers will be allowed poolside. All owners and their guests are responsible for disposing of any trash when they leave the pool.
7. Children under twelve (12) years of age **MUST** be supervised by a parent or guardian when in the pool area.
8. Pets are permitted. Dogs shall not exceed 20 lbs full grown. No aggressive breeds shall be allowed. All pets must be kept on a leash. Unit owners are responsible for picking up pet waste and disposing properly into the dumpster.
 - a. Support animals will require an ESA Certification or a signed document that the pet has been trained as an ESA. Certificate of good health signed by a licensed Veterinarian.
9. Unit owners **MUST** send written **INTENT** to the Board for request to rent their unit. Written approval from the Board will be required **PRIOR** to any renter taking occupancy of a unit. Violation of this rule will result in legal action.
10. Occupancy applications are to be accompanied by a signed copy of the lease or sales agreement and a copy of the initial payment check. Prospective occupants **MUST** submit to a background and credit information screening conducted by the Management Company. This fee is One Hundred (\$150) per person. Allow ten (10) days for screening to be completed. All occupants 18 years and older must submit to a background and credit screening.

Continued... RULES AND REGULATIONS

11. Non-owner occupants are required to make a security deposit. The amount to be One Thousand (\$1,000.00) but not to exceed the one month rental fee. These funds are to be kept in a separate escrow account, as protection against damage to the common elements and other expenditures of the Association made necessary by the occupant, his/her family or guest. The deposit shall be made upon receipt of the written occupancy approval and shall not be refunded in whole or part as long as the occupant remains in the condominium unit. This rule is pursuant to Florida Statute 718.112.
12. Leases must be for a minimum of one (1) year and there shall be no more than one (1) lease per year. A copy of the renewal lease must be supplied to the Board within thirty (30) days of the lease expiration.
13. Occupants are responsible for maintaining faucets, toilets and other water using appliances in a manner that will contribute to a minimum water bill for the Association.
14. No gas or charcoal barbeque grills shall be used on the balconies, terraces, roofs or porches of more than one story in accordance with City, State and County Fire Code (SFBC 5212.1 {d}). They shall be used only outside and at a safe distance of no less than ten (10) feet from the nearest building.
15. TV dish/TV antenna. Owners **MUST** obtain approval from the Board prior to installation. Wires must be in conduit or pipe and must be painted to match the color of the building. Owner may install one (1) television disc antenna that is less than three (3) feet in diameter, provided it is attached to a stand located on the roof and associated with each unit. The antenna shall be removed within sixty (60) days after discontinuance of use. The unit owner's are responsible for all costs and liabilities that may be incurred as a result of the installation and removal of the antenna.
16. **DUMPSTER ETIQUETTE AND RULES - (Trash pickup days are Mondays, Thursdays and Saturdays).**
 - a. The dumpster is for household trash only—NO Bulk items such as furniture, batteries, flammable liquids, paint, mattresses, large appliances, gas grilles, gas tanks, construction wastes, tires, hazardous materials, Christmas trees.
 - b. Do NOT pile trash or other items outside of the dumpster. Do not sling trash over the dumpster enclosure. All trash **MUST GO INSIDE THE DUMPSTER.**
 - c. Close the lids after you dispose of your trash. Do not leave the lids propped open. Several days of trash smells!!
 - d. There are 2 sides to the dumpster—The gates to the dumpster open completely so both sides of the dumpster can be utilized.
 - e. **BREAK DOWN ALL BOXES**—boxes take up valuable spaces
 - f. Securely tie up your trash before putting into the dumpster. Open bags and spilled food attracts rodents and animals!
 - g. **NO PARKING IN FRONT OF THE DUMPSTER! VIOLATORS WILL BE TOWED!**
17. **POOL RULES - Hours: 10am-10pm (*No children under 12 YOA permitted after 7pm*).**
 - a. Residents and House guests only.
 - b. Bathing Load: 8 persons.

Continued... RULES AND REGULATIONS

- c. **No one under 18 in the pool area after 7 PM unless accompanied by a resident adult.**
- d. Children UNDER 12 must be accompanied by an Adult.
- e. Keep noise level reasonable. Quiet hours 10 PM to 10 AM.
- f. **NO** pets in the pool area.
- g. **NO** food or drink in the pool area.
- h. **Breakable dishes or glasses prohibited.**
- i. Shower before using pool.
- j. Teen residents are limited to 2 guests unless supervised by a resident adult.
- k. **NO** pushing, shoving, horseplay.
- l. **NO** diapers allowed in the pool.
- m. Rafts & floats allowed only when pool is not crowded.
- n. **Failure to comply with these regulations will result in loss of pool privileges.**
- o. **NO DIVING.**

18. Violations of Rules or Condominium documents will result in a warning letter to the unit owner giving notice to correct the infraction. Failure to comply will result in further legal action.

Owner/tenant signature:

Printed Name:

Date:

Please note you may keep for your records as long as the Acknowledgement Form is signed by all applicants and is submitted with application.

GARDEN ISLE VILLAS CONDOMINIUM

C/o Allied Property Management Group, Inc.
1711 Worthington Road, Suite 103
West Palm Beach, FL 33409

Rules & Regulations - Acknowledgment Form

I _____ am acknowledging I have received a copy of the Association's Rules & Regulations and have decided to keep for my records.

Applicant: Date:

I _____ am acknowledging I have received a copy of the Association's Rules & Regulations and have decided to keep for my records.

Co-Applicant: Date:

I _____ am acknowledging I have received a copy of the Association's Rules & Regulations and have decided to keep for my records.

Co-Applicant: Date:

This form must be submitted in place of Rules and Regulation if you would like to keep for your records.