

MADISON LAKES HOMEOWNER ASSOCIATION INC. C/O GRS COMMUNITY MANAGEMENT 3900 WOODLAKE BLVD, #309 LAKE WORTH, FL 33463 Phone (561) 641-8554 Fax (561) 641-9448

MADISON LAKES HOMEOWNERS ASSOCIATION SALE/LEASE APPLICATION INFORMATION SHEET

REQUIREMENTS:

- 1. \$200.00 Application fee (<u>non- refundable</u>) payable by check or money order to **Madison Lakes HOA**.
- 2. \$100.00 Processing fee **per applicant** (<u>non- refundable</u>) payable by check or money order to **GRS Community Management**.
- 3. Background check on renter(s). (Initiated by Management Company)
 - a. A 650 minimum credit score for <u>all applicants will be required.</u>
 - b. Applicates with a credit score below 650 as calculated herein above shall be rejected.
- 4. Homeowner shall be current with Association assessments to allow rental of lot.

<u>AMENITIES</u>: Pool, hot tub and pool cabana, unmanned gate, lake fountain, full service lawn maintenance. Landscape replacement is homeowner responsibility.

ASSESSMENTS: Paid quarterly

IMPORTANT RESTRICTIONS:

Leases: Owners may **not** lease their unit for a period less than three (3) months and only once each calendar year.

<u>Pets</u>: Pets must be kept on a leash at all times while outdoors and all waste deposited by a pet shall be immediately removed by owner and/or pet walker. (**Palm Beach County Ordinance 98-22, Section 4-9** as well as Association Documents)

Homeowners subject to penalty for tenant occupancy without PRIOR Association approval.

*** LEASES MUST BE RENEWED YEARLY AND NEW LEASE APPLICATION FORM FILLED OIT AND RETURNED TO GRS MANAGEMENT. PROCESSING/APPLICATION FEES WAIVED FOR RENEWALS. *** MADISON LAKES HOMEOWNERS ASSOCIATION, INC. SALE/LEASE APPLICATION FORM

THIS FORM MUST BE COMPLETED BY THE PROPOSED BUYER OR LESSEE AND RETURNED TO: GRS COMMUNITY MANAGEMENT 3900 WOODLAKE BLVD SUITE 309 LAKE WORTH FL 33463 OFFICE 561-641-8554 FAX 641-9448

PLEASE ATTACH A COPY OF THE SALE/LEASE CONTRACT AGREEMENT AND DRIVERS LICENSE(S) OR I.D(S).

PLEASE ATTACH A NON-REFUNDABLE APPLICATION FEE OF **S200.00** PAYABLE TO: **MADISON LAKES HOMEOWNERS ASSOCIATION, INC.** AND A NON-REFUNDABLE PROCESSING FEE OF **\$100.00** PAYABLE TO **GRS MANAGEMENT ASSOCIATES INC.** <u>THESE PAYMENTS MUST BE IN THE FORM OF A MONEY</u> <u>ORDER OR CASHIERS CHECK.</u>

LEASES MAY NOT BE LESS THAN THREE (3) MONTHS AND NOT MORE THAN TWELVE (12) MONTHS. NO UNIT MAY BE LEASED MORE THAN ONE (1) TIME PER CALENDAR YEAR. <u>BOARD APPROVAL IS REQUIRED ON RENEWALS OF</u> LEASES 30 DAYS PRIOR TO EXPIRATION DATE OF LEASE.

<u>CAPITAL CONTRIBUTION</u>: ARTICLE XII, SECTION I AMENDED 3-7-17 - OWNERS WHO ACQUIRE OWNERSHIP TO THEIR LOTS, OTHER THAN BY INHERITANCE SHALL PAY A ONE-TIME CAPITAL IMPROVEMENT CONTRIBUTION IN THE AMOUNT OF \$300.00 AT THE TIME OF ACQUIRING OWNERSHIP.

OWNERS MUST PROVIDE NEW BUYERS WITH A COPY OF THE ASSOCIATION DOCUMENTS AND MUST PROVIDE LESSES WITH A COPY OF THE RULES AND REGULATIONS FOR MADISON LAKES HOMEOWNERS ASSOCIATION, INC. PROOF OF THIS MUST ACCOMPANY THIS APPLICATION.

ONLY TWO (2) HOUSEHOLD PETS PER UNIT ARE ALLOWED.

THE FOLLOWING VEHICLES WILL NOT BE APPROVED AND MAY NOT BE KEPT ON THE PROPERTY BY HOMEOWNERS: TRUCKS WITH OVERSIZED WHEELS, VEHICLES WITH LADDERS OR ANY CONSTRUCTION SUPPLIES, VEHICLES WITH LADDER RACKS, CAMPERS, MOTOR HOMES, TRAILERS, BOATS, BOAT TRAILERS, COMMERCIAL VEHICLES AND VEHICLES WITH ADVERTISING.

ARTICLE XII AMENDED 5/6/2010 – IF AN OWNER IS DELINQUENT IN PAYING ANY ASSESSMENT, LATE FEE, INTEREST OR ATTORNEY'S FEES INCURRED IN THE COLLECTION OF ASSESSMENTS AND THAT OWNER IS LEASING HIS/HER LOT AND/OR RESIDENCE, THEN THE OWNER SHALL BE DEEMED TO HAVE ASSIGNED TO THE ASSOCIATION HIS/HER RIGHT TO COLLECT THE RENT FROM THE TENANT. UPON DEMAND FROM THE ASSOCITION TO THE TENANT, THE TENANT SHALL PAY THE RENT DUE TO THE OWNER DIRECTLY TO THE ASSOCIATION. GARBAGE PICK-UP IS TUESDAYS AND FRIDAYS. RECYCLE PICKUP IS TUESDAYS AND VEGETATION PICKUP IS FRIDAYS. NO GARBAGE CANS. TRASH CONTAINERS OR RECYCLE BINS SHALL BE LEFT OUTSIDE PRIOR TO DAY BEFORE PICKUP AND OR PAST THE DAY OF PICKUP ...

VEHICLES ARE NOT PERMITTED TO PARK ON COMMUNITY ROADS BETWEEN THE HOURS OF MIDNIGHT AND 6:00 A.M.

THIS COMPLETED FORM MUST BE SUBMITTED TO THE ASSOCIATION OFFICE NO LATER THAN THRITY (30) DAYS PROR TO THE DESIRED DATE OF **RESIDENCY**.

PLEASE REFER TO THE ASSOCIATION DOCMENTS, I.E. ARTICLES OF **INCORPORATION, BY-LAWS AND RULES & REGULATIONS FOR COMPLETE** RULES.

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

Signature: _____

Date: _____

Signature: _____ Date: _____

MADISON LAKES HOMEOWNERS ASSOCIATION, INC. SALE/LEASE APPLICATION FORM APPLICATION FOR RESIDENCY

(TO BE <u>COMP</u>	<u>LETED BY PROSPE</u>	CTIVE PURCHASER/LEESEES	
PRESENT OWNER'S NAM	1E:	Tel	
ADDRESS OF UNIT FOR	SALE OR LEASE:	BOYNTON BEACH, FL 33437	
NAME OF REALTOR HAN	DLING SALE OR LEA	SE	
REALTOR TEL	REALTOR E	-MAIL ADDRESS:	
APPLICATION IS REGARI	DING THE:		
	HIS UNIT	□ SALE OF THIS UNIT	
BUYER'S NAME(S)			
CLOSING DATE			
BUYER'S'S E-MAILADDR	ESS		
LEESEE''S NAME:			
		то	
MARITAL STATUS			
		SS#:	
LEASE'S E-MAIL ADDRES	SS		
MAIDEN NAME:		MARITAL STATUS:	
DATE OF BIRTH:		SS#:	
SPOUSE/CO-APPLICANT	E-MAIL ADDRESS		
NUMBER OF ADULT OCC	UPANTS:	NUMBER OF CHILDREN	
OTHER I	PERSONS WHO WILL	OCCUPY UNIT WITH YOU:	
NAME	DOB	RELATIONSHIP	

MADISON LAKES HOMEOWNERS ASSOCIATION, INC.

SALE/LEASE APPLICATION FORM

RESIDENCY INFORMATION (SECTION #1)

PRESENT ADDRESS: _			
CITY:	STATE:	Z	
TEL: (HOME)		(WORK):	
DO YOU OWN	OR RENT	AT YOU	R PERSENT ADDRESS?
HOW LONG?			
IF RENTING, NAME OF			
TEL:			
AUT	OMOBILE INFORM	ATION (SECTIO	<u>N #2)</u>
NUMBER OF VEHICLES	6		
DRIVER'S LICENSE #:			
LICENSING STATE:		_ EXPIRATION	DATE
DRIVER'S LICENSE #:			
LICENSING STATE:		_EXPIRATION	DATE
VEHICLE #1: TYPE;	AUTO	VAN S	UV OTHER
МАКЕ	MODEL		YEAR
COLOR	LICENSE PLATE	#	STATE
VEHICLE #2: TYPE;	AUTO	VAN	SUV OTHER
MAKE	MODEL		YEAR
COLOR	LICENSE PLATE	. #	STATE
	PET INFORMATIO (Write none		
TYPE:	BREED: _		WEIGHT:
TYPE:	BREED: _		WEIGHT:

Please attach a current tag/veterinarian certificate

MADISON LAKES HOMEOWNERS ASSOCIATION, INC. SALE/LEASE APPLICATION FORM

EMERGENCY CONTACT INFORMATION (SECTION #4)

IN CASE OF AN EMERGENC	Y CONTACT:	
ADDRESS:		
TEL:	RELATIONSHIP:	
<u>CHARAC</u>	<u>TER REFERENCES (SECTION #5)</u> ot provide names of relatives)	
NAME:	RELATIONSHIP: _	
TEL: (HOME)	(WORK):	
NAME:	RELATIONSHIP: _	
TEL: (HOME)	(WORK):	
EMPLOYN	IENT INFORMATION (SECTION #6	<u>5)</u>
EMPLOYER OR BUSINESS:		
TEL:	ADDRESS:	
	EMPLOYED FROMTO	
PREVIOUS EMPLOYER:		
TEL:	ADDRESS:	
POSITION:	EMPLOYED FROM TO	
SPOUSE'S EMPLOYER:		
TEL:	ADDRESS:	
POSITION:	EMPLOYED FROMTO	

IMPORTANT MAILNG INFORMATION:

If Application is approved by the Association, please advise below, where the office of the association should direct all mail once the closing has taken place.

MADISON LAKES HOMEOWNERS ASSOCIATION, INC. **PROOF OF RECEIPT OF DOCUMENTS**

(FOR SALES ONLY)

I/We the undersigned, acknowledge that I/We have received the Declaration of Restrictions, the By-laws and the Articles of Incorporation for the MADISON LAKES HOMEOWNERS ASSOCIATION, INC.

Signature:	[Date: _	
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Signature: _____ Date: _____

PROOF OF RECEIPT OF RULES & REGULATIONS

(FOR SALES AND LEASES)

I/We the undersigned, acknowledge that I/We have received the Rules & Regulations for the MADISON LAKES HOMEOWNERS ASSOCIATION, INC

Signature:	Date:	
	-	

Signature: _____ Date: _____

MADISON LAKES HOMEOWNERS ASSOCIATION, INC.

HOMEOWNERS ASSOCIATION DISCLOSURE

- 1. As a buyer of Property in Madison Lakes you will be obligated to be a member of a homeowners' association ("Association")
- 2. There are recorded restrictive covenants (Covenants") governing the use and occupancy of properties in Madison Lakes.
- 3. You will be obligated to pay assessments to the Madison Lakes Homeowners Association, Inc., which assessments are subject to periodic change.
- 4. Your failure to pay theses assessments could result in a lien on your property.
- 5. The Covenants cannot be amended without the approval of the Association's membership.
- 6. The statements contained in this disclosure form are only summary in nature and as a prospective Buyer you should refer to the Covenants and the Association's governing documents.
- 7. These Documents are a matter of public record and can be obtained from the record office in the county where the Property is located.

Lot Number: _____

Buyers Signature

Date

Buyers Signature

Date

AUTHORIZATION FILE DISCLOSURE

APPLICANT/TENANT CONSENT

I hereby consent to allow Verify Screening Solutions, Inc., through its designated agent/employee, to obtain and verify my consumer reports, including but not limited to, my credit report, criminal information, and eviction information for the purpose of determining my eligibility to lease/purchase an apartment. I further understand if I lease/purchase an apartment, I consent to allow Verify Screening Solution, Inc. and it's designated agent/employee, for the duration of my lease, to review the following list of information to assess risk, for analytics, for process improvement, and other uses: my consumer reports, including but not limited to my credit report, criminal information, eviction information, my rental payment history, and occupancy history, and other information. The facts set forth in my application for residency are true and complete. False, fraudulent or misleading information on an application may be grounds for denial of residency or subsequent eviction.

Signature	Date
Printed Name	Date of Birth
Social Security Number	_
Driver's License Number	State
2 nd Applicant's Signature	Date
Printed Name	Date of Birth
Social Security Number	
Driver's License Number	State

ADDITIONAL OCCUPANTS OVER 18, AUTHORIZATION FORM IS REQUIRED