

GREYSTONE OF BOYNTON BEACH HOMEOWNERS ASSOCIATION

C/O GRS COMMUNITY MANAGEMENT.

3900 WOODLAKE BLVD., SUITE 309

LAKE WORTH, FL 33461

PHONE (561) 641-8554 / FAX (561) 641-9448

APPLICATION FOR LEASE

- () \$50.00 Background Check Fee **PER APPLICANT**, payable to GRS Community Management – All Applicants must sign the enclosed authorization form approving a background and credit check.
- () \$175.00 Application Fee, payable to Greystone HOA
- () \$1,500.00 Community Amenities Security Deposit, payable to Greystone HOA at time of orientation, Only Certified Bank Checks will be accepted.
- () Pictures of Vehicles and vehicle registration attached.
- () Pictures of pets (if applicable) and pet veterinary records, breed, vaccinations
- () Completed lease contract attached
- () Copy of driver's license **(FOR ALL OCCUPANTS 18 AND OVER)**
A MINIMUM CREDIT SCORE OF 650 IS REQUIRED FOR ALL
APPLICANTS.

APPROVAL REQUIRED - Please deliver completed applications to the GRS Community Management Office at the above address. All required documentation must be submitted at that time; **partial applications will not be accepted.**

After the application is processed **an appointment with the property manager is required at the on-site Greystone office.** You will be contacted directly for scheduling. The \$1,500 community amenities security deposit is due at the time of the on-site meeting.

To reach the manager directly please contact Amber Skelton at:

askelton@grsmgt.com or 561-732-6534

GREYSTONE OF BOYNTON BEACH HOMEOWNERS ASSOCIATION, INC.
Application For LEASE

******Note: This form is for all occupants over the age of 18, please make additional copies if needed.******

FILL IN ALL BLANKS, APPLICATIONS MAY BE RETURNED IF NOT FULLY COMPLETED

Date: _____

Desired Date of Occupancy: _____

This Application is for a: Lease

Property Address: _____

Realtor's Name: _____ Phone # _____

Applicant's 1 Name: _____

Phone # _____ Cell Phone # _____

E-Mail Address _____

DL# _____ State _____

MARITAL STATUS: Married () Separated () Divorce () Single ()

Applicant 2 Name: _____

Phone # _____ Cell Phone # _____

E-Mail Address _____

DL# _____ State _____

Number Of People Who Will Occupy The Unit _____

List All Occupants:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

VEHICLES

Make: _____ Model: _____

Tag# _____ State _____ Year: _____

Make: _____ Model: _____

Tag# _____ State: _____ Year: _____

RESIDENCE HISTORY:

Present Address: _____

Apt: _____ OWN () RENT () Years _____

City _____ State _____ Zip _____

Name of Landlord _____ Phone # _____

Previous Address: _____

Apt: _____ OWN () RENT () Years _____

City _____ State _____ Zip _____

Name of Landlord _____ Phone # _____

Previous Address: _____

Apt: _____ OWN () RENT () Years _____

City _____ State _____ Zip _____

Name of Landlord: _____ Phone # _____

EMPLOYMENT HISTORY

ARE YOU: Self-Employed? Yes () No () Retired? Yes () No ()

Applicant 1 Employer _____

City _____ State _____ Zip _____

Phone # _____ From: _____ To: _____

Dept. or Position: _____

Supervisor: _____ Monthly Income _____

Previous Employer _____

City _____ State _____ Zip _____

Phone # _____ From: _____ To: _____

Dept. or Position: _____

Supervisor: _____ Monthly Income _____

Applicant 2 Employer _____

City _____ State _____ Zip _____

Phone # _____ From: _____ To: _____

Dept. or Position: _____

Supervisor: _____ Monthly Income _____

Previous Employer _____

City _____ State _____ Zip _____

Phone # _____ From: _____ To: _____

Dept or Position: _____

Supervisor: _____ Monthly Income _____

REFERENCES (No Relatives)

1. Name _____ Years Known _____
Address _____ Phone # _____

2. Name _____ Years Known _____
Address _____ Phone # _____

HAVE ANY OF THE APPLICANTS EVER BEEN ARRESTED FOR ANYTHING OTHER THAN A MINOR TRAFFIC OFFENSE? Yes () No ()

If yes please explain:

Applicant represents that all information given is true and correct and understands that as part of our procedure for processing your application, an outside agency, will make an investigation from the information given and present their finding to us for review. This investigation may include, but is not limited to, character, general reputation, credit, residence and criminal search. Applicants agree not to hold the Association or its agent liable for the discovery or non-discovery of information or any actions taken as a result of this investigation. **Authorization is hereby given to release banking, credit, residency, employment and other information pertinent to this application.**

Applicant Signature: _____

Date: _____

Applicant Signature: _____

Date: _____

Applicant Signature: _____

Date: _____

Applicant Signature: _____

Date: _____

GREYSTONE HOMEOWNERS ASSOCIATION, INC.

ADDENDUM TO LEASE

This ADDENDUM is made between _____ (“Landlord”) and _____ (“Tenant”) effective this ____ day of _____, 20____, and is intended to and shall supplement, amend and modify that certain LEASE dated _____ in the following respects:

1. Tenant(s) are subject to and shall abide by all covenants and restrictions and rules and regulations set forth in the Amended and Restated Declaration of Conditions, Covenants, Easements and Restrictions for Greystone Homeowners Association, (“Greystone”); Bylaws of Greystone Homeowners Association; Articles of Incorporation of Greystone; and any rules and regulations for Greystone.
2. In the event the Landlord/owner becomes delinquent in the payment of assessments (regular or special) or other charges to the Association, the Association may notify the Tenant. Upon such notification, the Tenant shall be obligated to pay the rent required under the lease to the Association, until all delinquent assessments and other charges have been paid in full.

Witness: _____

LANDLORD: _____

Print Name: _____

Print Name: _____

Witness: _____

TENANT: _____

Print Name: _____

Print Name: _____

Witness: _____

TENANT: _____

Print Name: _____

Print Name: _____

**GREYSTONE OF BOYNTON BEACH HOMEOWNERS ASSOCIATION
C/O GRS COMMUNITY MANAGEMENT.
3900 WOODLAKE BLVD, SUITE 309
LAKE WORTH, FL 33463
PHONE (561) 641-8554 / FAX (561) 641-9448**

TO: ALL NEW LESSEES
FROM: THE BOARD OF DIRECTORS
RE: PROPERTY ADDRESS _____

In submitting this application, we do hereby declare that all occupants and invitees of the aforementioned house:

1. Will abide by all restrictions, rules and regulations of the Association documents effective at this writing or hereinafter imposed by Greystone Homeowners' Association, Inc.
2. That we have been informed of the Pet Restrictions: Article X USE RESTRICTIONS – Section 7 ANIMALS AND PETS, Page 56, in the Declaration of Covenants, Restrictions and Easements for Greystone of Boynton Beach Homeowners Association, Inc.
3. Understand that the acceptance for Lease of any Home in Greystone is conditioned upon the truth and accuracy of this application. Occupancy prior to acceptance of the application by the Board of Directors or other designated authority is prohibited. Any misrepresentation or falsification of the information in this application or premature occupancy will result in automatic rejection of the application.

Upon acceptance of the application, Lessee will receive an acceptance form signed by a member of the Board of Directors or by a designated authority. In the event the application is rejected, Lessee will receive a letter of explanation. **I UNDERSTAND THE REQUIREMENTS AND OBLIGATIONS AS SET FORTH ABOVE AND AGREE TO COMPLY WITH SAME.**

Signature: _____ Signature: _____

Date: _____ Date: _____

GREYSTONE HOMEOWNERS ASSOCIATION, INC.

INITIAL RULES AND REGULATIONS

LEASING OF HOMES

1. No portion of a Home, other than an entire Home, shall be rented by the Owner. No Home, or portion thereof, shall be sub-let.
2. All leases shall provide that the right of the tenant to use and occupy the Home and the Association Property shall be subject and subordinate in all respects to the provisions of the Declaration and the Rules and Regulations.
3. All leases shall provide for a minimum lease term of twelve months. No lease shall provide for an early termination which would reduce a lease term to a period of lease than twelve months except in the event of a default by the tenant.
4. The Owner of a leased Home shall be jointly and severally liable with hi tenant for compliance with the Association Documents and Rules and Regulations and to the Association to pay Assessments and/or any claim for injury or damage to persons or property caused by the acts or omissions of the tenant and/or those for whom the Owner is responsible.

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 a unit. I further understand that if I lease/ purchase a unit, I consent to allow Verify Screening Solutions Inc., and its 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

2nd 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

