LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

Instructions for Lease OR Purchase Application

Fees required

Lease

\$25 non-refundable application fee per applicant made payable to: LUCERNE GREENS \$75 non-refundable admin fee per application to GRS MGMT

Purchase

\$25 non-refundable application fee per applicant made payable to: LUCERNE GREENS \$75 non-refundable admin fee per application to GRS MGMT

Money order or cashier's check is the only form of payment accepted. Fees are per applicant or occupant 18 years or older, made payable to Lucerne Greens Condo per person (married couples considered as one, if different last names, a marriage certificate is required)

Documents required, filled out and signed

Lease

- Application to the Association (*)
- Lease fully executed copy
- Rules and Regulations (*)
- Drivers License(s) photo ID copy
- Condition for Lease Approval (*)

<u>Purchase</u>

- Application to the Association (*)
- Sales contract fully executed copy
- Rules and Regulations (*)
- Drivers License(s) photo ID copy

* Forms provided in package

Other information

- ♦ All occupants over 18 years old require a background and criminal check.
- ♦ Pet restriction: No Pets Allowed
- Owners are to ensure that their tenants/buyers are provided the governing documents.
- Owners must have any open violation(s) closed and account paid current by the time of approval.
- ♦ No commercial vehicles. No motorcycles, pick-up trucks, RV's or Boats
- Key cards can be purchased at the on-site office at clubhouse.
- Please allow 30 days to process application.
- ◆ Parking: One assigned parking space per unit.
- ♦ Maximum number of occupants cannot exceed four (4) per unit.
- No personal plantings on common property.

**** Application will NOT be accepted without the required fees. ****
****** INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.*****

Submit the entire package to: GRS Management Associates, Inc.

3900 Woodlake Blvd., Suite 309

Lake Worth, FL 33463

Submit package during: 9 a.m. to 5 p.m.

Direct all inquiries regarding this application to: customerservice@grsmgt.com or 561-641-8554



LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

The following documents are required for the leasing or purchasing a unit at Lucerne Greens Condominium Association. Please read carefully and return to GRS Management for processing.

INTERNATIONAL APPLICANTS MUST PROVIDE A COPY OF THE PASSPORT/TRAVEL VISA OR OTHER VALID TRAVELING DOCUMENTS.

| Application fee: A separate check or money order in the amount of \$25.00 per applicant, made |
|---|
| payable to Lucerne Greens Condo per person (married couples considered as one, if different last names, a marriage certificate is required). A separate check or money order in the amount of \$75.00 per applicant, made payable to GRS Management. NOTE: Adult children, 18 years and older, residing with parents are also |
| required to be screened and pay an application fee. |
| All application forms must be complete. |
| All applicants, 18 years and older, are required to complete the background authorization form. |
| Rules & Regulations are required to be signed and dated by all applicants 18 years and older. |
| Copy of Drivers License or Valid Photo Identification for all applicants 18 years or older. |
| Copy of Vehicle Registration and Auto Insurance for all vehicles listed in the application. |
| Potential tenant/buyer screening. The Association requires ten (10) business days from the submission date of a completed application packet to arrange an interview. |
| A copy of the executed sales contract or lease agreement signed by the current unit owner and potential buyer/lessee. |
| A copy of the Condition for Lease Resolution, signed by homeowner and tenant. |



3900 Woodlake Blvd., Suite 309 Lake Worth, FL 33463 Phone (561) 641-8554 Fax (561) 641-9448

LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

APPLICATION FOR PURCHASE OR LEASE

Circle Purchase or Lease

| ADDRESS/BUILDING/UNIT #: | |
|-------------------------------|--------|
| | |
| OWNERS/REALTOR NAME: | |
| | |
| PHONE NUMBER OF OWNER/REALTOR | · · |

Completed application, along with appropriate photo I.D. before consideration or processing will commence. To ensure proper and timely processing, the foregoing must be received a minimum of 30 days prior to any closing date/move in date.

A fully executed and signed purchase agreement or lease must accompany the application.



LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

APPLICATION FOR PURCHASE OR LEASE

CIRCLE PURCHASE OR LEASE

| ADDRESS/BUILDIN | G/UNIT #: | | | |
|-------------------------------|------------------------------|---------------------|------------------|--|
| Applicant Last Name | First Name | Middle | Birth Date | |
| Social Security No. | | Drivers License No. | State of License | |
| Marital Status: | Single | Married | Separated | |
| Co-Applicant Last Name | First Name | Middle | Birth Date | |
| Social Security No. | | Drivers License No. | State of License | |
| Email Address | | | | |
| Expected Move In Date | | | | |
| Will the above listed person | (s) be the only occupants? | ?YesNo | | |
| If No, list other occupants w | rith Date(s) of Birth below: | | | |
| | NUMBER OF O | CCUPANTS TO LIVE IN | I RESIDENCE | |
| NAME: | | DA | TE OF BIRTH: | |
| NAME: | | DA | TE OF BIRTH: | |
| NAME: | | DA ⁻ | TE OF BIRTH: | |

Maximum number of occupants cannot exceed four (4) persons per unit



RESIDENCE HISTORY

| Current Address | С | ity/State | Zip Code | | |
|---|---|---------------------|-------------------|----------|--|
| Area Code/Phone Number | | Own | Rent | How Long | |
| Name & Address of present landlord or m | ortgage co. | Area Code/Phone No. | Monthly Pa | yment | |
| Previous Address (include landlord and ap | ot community) | Area Code/Phone No. | How Long | | |
| | <u>EMPL</u> | OYMENT HISTORY | | | |
| Applicant employed by | Sup | ervisors Name | Н | ow Long | |
| Address | Area Code/Phone Number | | | | |
| Position Held | Wage Per hour/ week/ bi-weekly/ monthly | | | | |
| Applicant previously employed by | Supervisors Name | | Н | How Long | |
| Address | Area Code/Phone Number | | | | |
| Position Held | Wage Per hour/ week/ bi-weekly/ monthly | | | | |
| Co-Applicant employed by | Sup | ervisors Name | Н | ow Long | |
| Address | Area Code/Phone Number | | | | |
| Position Held | Wage Per hour/ week/ bi-wee | | weekly/ monthly | | |
| Co-Applicant previously employed by | Sup | ervisors Name | Н | ow Long | |
| Address | Area Code/Phone Number | | | | |
| Position Held | Wage | Per hour/ weekly/ b | i-weekly/ monthly | | |



LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

ADDITIONAL INCOME

| Sources | | | | Amount per | Year |
|--------------|-------|--------------|-----------------|------------|-------|
| | | VEHICLE INFO | <u>ORMATION</u> | | |
| Vehicle make | Model | Year | Color | Tag # | State |
| Vehicle make | Model | Year | Color | Tag # | State |
| Vehicle make | Model | Year | Color | Tag # | State |

NO COMMERCIAL VEHICLES, PICK-UP TRUCKS, MOTORCYCLES, RV'S OR BOATS



LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

APPLICANT AUTHORIZATION

- I, hereby, authorize and request any present or former landlord, employer, school, police department, financial institution, agency or other persons having personal knowledge about me, to furnish bearer with any and all information in their possession regarding me in connection with an application for residence.
- I, hereby, authorize LexisNexis, a service of LexisNexis, to obtain and verify such information including accessing consumer reporting agencies as well as performing a criminal and eviction record search.

I have been notified that a consumer report will be requested and understand that the information that LexisNexis obtains is to be used in the processing of my purchase or lease application.

I, hereby, release and hold harmless LexisNexis, a service of LexisNexis, its affiliates, employees and agents and any other organization that provides information from any and all liabilities arising out of the use of such information in connection with LexisNexis.

| Print Name | |
|--------------------------|------|
| Applicant's Signature | Date |
| Co-Applicant's Signature | Date |



LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

CONDITION FOR LEASE APPROVAL (Complete for Leases only)

Effective July 30, 2009, as a condition for lease approval, the Unit Owner and Lessee shall agree to the following:

In the event the Unit Owner is delinquent the payment of assessment (which includes maintenance fees or any other charges owed to the Association) for more than thirty (30) days, the Association may notify 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 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 fees incurred by the Association.

This form must be signed by both the Unit Owner & the Lessee: Building # _____ Unit

Signature

| Term of Lease: | Start Date: | End Date: | |
|----------------------|-------------|-----------|------|
| | | | |
| FOR UNIT OWNER | | | |
| Name: | | Phone: | |
| Signature: | | Date: | |
| FOR UNIT TENANT | | | |
| Name: | | Phone: | |
| Signature: | | Date: | |
| FOR SCREENING CO | MMITTEE | | |
| Screened by: Signatu | ure | Print | Date |

Print

Date



LLC PURCHASE ADDENDUM TO PURCHASE APPLICATION

- 1. We require the paperwork that established such entity (LLC)
- 2. The entity must designate one person to occupy the unit. And, no other person will be entitled Occupy the unit
- 3. The designated person must be a shareholder or officer of the entity (LLC). Copies of such proof of shareholder or officer, must be provided to Lucerne Greens.
- 4. Additionally, since the assets of the LLC are unknown, it is required that the designated occupant sign the personal guaranty. The personal guaranty must state:

PERSONAL GUARANTY

Date:

In return for the Association's approval of this purchase, I personally guarantee the payment of any Assessments or other charges owed to the Association if (put in name of LLC) does not pay the Association (Lucerne Greens Condominium Association) in a timely manner.

| Signed: |
|---------------|
| Print Name |
| Oate: |
| Vitnessed by: |
| Print Name |
| Date: |

I understand that the client has already been screened.



LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

CERTIFICATE OF APPROVAL FOR PURCHASE

| | | | has/have been approved by LUCERNE GREENS |
|--------------------------------|------------------------------------|-------------------------|---|
| CONDOMINI | UM ASSOCIATI | ON, as the purchaser of | of the following described property in Palm Beach County, Florida: |
| Bldg# | , Unit# | , located at | Lucerne Lakes Boulevard, Lake Worth, Florida, 33467, |
| Account # | | | |
| | l has been give of the Associat | · | vision of the Declaration of Covenants, Conditions and Restrictions and |
| Dated | | В | y: |
| | _ | | Authorized Agent |
| Witness | | | Witness |
| State of Flori County of Pa | | | |
| acknowledge association to | ements, person o me know to b | ally appeared/known | n officer duly authorized in the County and State aforesaid to take agent of the above and in and who executed the foregoing instrument and they ame. |
| • | nand and offici | • | nd State last aforesaid, this day of |
| Signature, | Notary Pub | lic, State of Florida | |
| Print, | Notary Pub | lic, State of Florida | |