## FOREST HILL VILLAS GARDEN CONDOMINIUM ASSOCIATION, INC C/O GRS COMMUNITY MANAGEMENT, INC. 3900 WOODLAKE BLVD., SUITE 309 LAKE WORTH, FL 33463 PHONE (561) 641-8554 / FAX (561) 641-9448

# **APPLICATION FOR LEASE**

() \$150 Application fee per applicant over 18 years old or per married couple, payable to: **GRS Community Management (non-refundable) Money Order or Cashier Check ONLY** 

()\$500 Community Amenities Security Deposit, payable to: Forest Hill Villas Garden Condominium Association, INC (refundable)

- () Copy of the signed lease or purchase contract
- () Copy of driver's license and vehicle registration (2 vehicles only)
- () Attach a color picture of vehicles front and back and pet
- () Credit score must be a minimum 600
- () No felony convictions for the past (5) years
- () Provide current background and credit check

The Association requires **all prospective tenants** to attend an Orientation meeting to discuss the Rules and Regulations of the Community. **This meeting will take place at the Clubhouse at Forest Hill Villas.** Failure to comply may result in your application being declined or certificate of approval not being issued. Failure to comply with the Rules and Regulations of the Community may result in the termination of the lease.

**APPROVAL REQUIRED** – Application must be delivered to GRS Community Management Associates' office at above address and all documents must be submitted with the Application.

Contact: Property Manager: Darcel Dookwah or e-mail ddookwah@grsmgt.com

# Forest Hill Villas Garden Condominium Association, INC Lease Application

Please print legibly and complete all the sections

LEASE BEGIN DATE:	LEASE END DATE:	

#### UNIT INFORMATION

PROPERTY ADDRESS	MOVE-IN DATE
CURRENT OWNER NAME	CONTACT #

#### **APPLICANT INFORMATION**

APPLICANT NAME	C0-APPLICANT NAME
PRIMARY CONTACT #	PRIMARY CONTACT#
EMAIL	EMAIL
CURRENT MAILING ADDRESS	CURRENT MAILING ADDRESS
CITY-STATE-ZIP	CITY-STATE-ZIP
EMERGENCY CONTACT NAME & TELEPHONE	EMERGENCY CONTACT NAME & TELEPHONE
MARTIAL STATUS MARRIED ( ) SINGLE ( )	MARTIAL STATUS MARRIED ( ) SINGLE ( )

#### OTHER OCCUPANTS

NAME	RELATIONSHIP	DOB
NAME	RELATIONSHIP	DOB
NAME	RELATIONSHIP	DOB

#### **REALTOR INFORMATION**

REALTOR'S NAME	PHONE #	EMAIL

## **ADDITIONAL INFORMATION**

#### **EMPLOYMENT HISTORY**

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

EMPLOYER	CO-APPLICANT/SPOUSE EMPLOYER
CITY-STATE-ZIP	CITY-STATE-ZIP
PHONE#	PHONE#
EMPLOYED FROM: TO:	EMPLOYED FROM: TO:
DEPARTMENT OR POSITION	DEPARTMENT OR POSITION
SUPERVISOR	SUPERVISOR
SUPERVISOR	SUPERVISOR
MONTHLY INCOME	MONTHLY INCOME
	1

#### **VEHICLE INFORMATION**

If you have any recreational vehicles, (vans, boats, motorcycles) please specify.

NOTE: Certain vehicles	may be pronibited.				
MAKE	MODEL	COLOR	STATE	TAG #	
		002011	•••••		
MAKE	MODEL	COLOR	STATE	TAG #	
MARL	WODLL	COLOR	SIAIL	TAG #	

### **PET INFORMATION**

(Write none if no pets)

ТҮРЕ	BREED	RABIES LICENSE TAG #	COLOR	WEIGHT
TYPE	BREED	RABIES LICENSE TAG #	COLOR	WEIGHT

#### GATE ACCESS REQUEST

TELEPHONE # TO PROGRAM INTO GATE SYSTEM	OFFICE USE ONLY
	GATE#

## Forest Hill Villas Garden Condominium Association, INC ADDENDUM TO LEASE APPLICATION

THIS ADDENDUM is made between			("Landlord	") and
	_ ("tenant(s)") for unit:	effective this	day of	20
and is intended to and sha following respects:	all supplement, amend, and	modify that certain Le	ease dated	, in the

- Tenant(s) is subject to and shall abide by Florida Statutes: Assessments: Tenant Occupancy: Where an
  owner is delinquent in any monetary obligation to the Association, the Association can make a demand for
  the tenant to pay to the association the future monetary obligations related to the Association unit owed to
  the Association. The demand must be in writing. If the tenant fails to comply, the Association may have the
  tenant evicted in accordance with Florida Statutes. The unit owner shall give the tenant a credit against
  rent due to the unit owner for any amounts paid by the tenant to the Association.
- 2. In the event the landlord/owner becomes delinquent in payment of assessments (regular, general 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. During the period the tenant is paying the rent to the Association, the landlord shall not seek to evict the tenant for non-payment of rent.

LANDLORD

Printed Name

TENANT

Printed Name

TENANT

Printed Name

## CONDOMINIUM ASSOCIATION, INC.

## PET APPLICATION

I/We	_ and
(name)	(name)
Of Apt. # at Building Forest Hill B	3lvd. in Forest Hill Villas Condominium Association:
DO NOT HAVE A PET (put an "X" in the box): [ ]	
OR I/we request permission from the Board of Director	ors to have a:
Description of Pet & Breed:	
Type of Pet (please circle one) Dog Cat Bird Othe	r (specify):
Pet's Name:	
Pet's Age:	
Pet's Weight:	
Pet's License/Tag Number:	

## Attach a color picture of your pet.

I/We state that this pet will not exceed the weight of \_\_\_\_\_\_Ibs.

#### PET RULES:

- All pets must be approved by the Board of Directors
- No more than two (2) pets are allowed
- No pets allowed in excess of 50 lbs. combined weight at maturity
- Photo of pet must be submitted
- All dogs must be kept on a leash at all times
- All pet waste must be picked up immediately
- · Pets cannot be left outside on the patio for extended amounts of time

I/We have read the Pet Rules of the Condominium Association and hereby agree to abide by them. I/We understand that if these rules are not followed that we will be turned over to the Association's attorney which will involve all attorney expenses. The Association may require that the pet(s) be removed from the Unit. Please complete the following:

Signature

Date

Signature

Date

FAILURE TO COMPLETE THIS FORM WILL RESULT IN THE RESIDENT TO IMMEDIATELY REMOVE THE ILLEGAL PET