



3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463
Ph: (561) 641-8554 / Fx: (561) 641-9448

PALM ISLAND VILLAS at WILTON MANORS HOMEOWNERS' ASSOCIATION, INC.

APPLICATION FOR PURCHASE OR LEASE

- ***\$200.00 Non-refundable application processing fee for each applicant (unless married) and payable to GRS Community Management in the form of money order or cashier's check.***
- ***Purchaser(s) shall pay a working capital fund equal to twice the monthly assessments at time of closing.***

INDIVIDUAL COMMUNITY REQUIREMENT CHECKLIST

- _____ Copy of Lease or Purchase Contract must be attached.
- _____ Copy of driver's license(s), vehicle registration(s) and proof of insurance must be attached.
- _____ Occupancy may not exceed two (2) persons per bedroom in the unit and only applicants and occupants on the application are permitted to reside in the unit.
- _____ At the time of the Lease application (whether is a New Lease or Lease Renewal) the Lot Owner **MUST NOT be delinquent in** the payment of the Association dues and/or have any open and unresolved violations. The account must be brought current before any lease application can be considered for approval by the Association.
- _____ Only two (2) dogs or two (2) cats (or one (1) of each) is permitted in the unit. Pets are to be approved.
- _____ Sales per state of FL- the new owners **MUST** provide a copy of the Warranty Deed and up to date contact information to the association after the sale of the unit is completed.
- _____ The approval of a purchase and/or lease application may take up to fifteen (15) business days.

APPROVAL REQUIRED – Application, fees and all applicable documentation must be mailed, or hand delivered to GRS Community Management at the address indicated above.

Please visit grsmgt.com > **Palm Island Villas at Wilton Manors Homeowners' Association, Inc. > Association Documents** for a comprehensive overview of the Rules and Regulations of the Association.

Purchase or Lease Application

PALM ISLAND VILLAS AT WILTON MANORS HOMEOWNERS' ASSOCIATION, INC.

Please print legibly and complete all the sections.

LEASE BEGIN DATE:	LEASE END DATE:	SALE CLOSING DATE:
-------------------	-----------------	-----------------------

UNIT INFORMATION

PROPERTY ADDRESS	MOVE-IN DATE
CURRENT OWNER NAME	CONTACT #

APPLICANT INFORMATION

APPLICANT NAME	CO-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
----------------	---------	-------

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 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

Palm Island Villas at Wilton Manors Homeowners' 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 shall supplement, amend, and modify that certain Lease dated _____, in the following respects:

1. 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 of time the tenant is paying the rent to the Association, the landlord shall not seek to evict the tenant for non-payment of rent.

LANDLORD:

Please Print Name

Signature

Date

TENANT:

Please Print Name

Signature

Date

TENANT:

Please Print Name

Signature

Date



3900 Woodlake Blvd., Suite 309, Lake Worth, FL 33463
Ph: (561) 641-8554 / Fx: (561) 641-9448

**PALM ISLAND VILLAS AT WILTON MANORS HOMEOWNERS' ASSOCIATION, INC.
PET REGISTRATION**

Name of Homeowner(s): _____

Property Address: _____

A. Please indicate type of pet(s)/animal(s), including service animals. Attach a recent picture of your pet(s), taken within the last six (6) months, and accurately show the pet(s)/animal(s) as of the date of this registration.

I. Type of Pet(s): _____ **Weight:** _____ **Color:** _____

Breed: _____ **Tag Number:** _____

II. Veterinarian Reference: (Please attach a current certificate of vaccination/health certified by a licensed veterinarian within the past thirty (30) days.)

Name: _____ **Phone No.:** _____

Address: _____

B. By submitting this registration application, Resident understands and agrees that the pet(s)/animal(s) is subject to the association's governing documents, including but not limited to association's Declaration of Covenants and Restrictions and its Rules and Regulations and all state and local laws. Accordingly:

1. Only two (2) dogs or two (2) cats (*or one (1) of each*) is permitted per unit.
2. When outside the unit, all pet(s)/animal(s) must be on a leash which is attached to the pet/service animal and in direct physical control of a person capable of always controlling such pet and the pet(s)/animal(s) will not be left unattended at any time.
3. Resident agrees to register the pet(s)/animal(s) in accordance with local laws and requirements, and to immunize pets in accordance with such local laws and requirements.
4. Resident shall be responsible for any damage created by a pet/animal to association property.
5. The pet(s)/animal(s) will not cause danger, threat to any person or other pet, nuisance, noise, health hazard, or soil the premises, grounds, common areas, walks, parking, landscaping, or gardens. Resident agrees to clean up after the pet(s)/animal(s) and agrees to accept full responsibility and liability for any damage, injury or action arising from or caused by his/her pet(s)/animal(s). Resident agrees that if their pet/animal becomes annoying, bothersome, or in any way a nuisance or disturbance to other Residents or to the operation of the association, the Resident will, upon notice from association remove the offending pet/animal from the premises.

PALM ISLAND AT WILTON MANORS HOMEOWNERS' ASSOCIATION, INC.

PROSPECTIVE OWNER/LESSEE ACKNOWLEDGEMENT

The undersigned being a prospective Owner or Lessee of the following Property Address:

_____, in **Palm Island at Wilton Manors Homeowners' Association,**

Inc. acknowledges that I/We have read, understand, and agree to follow and abide by all the terms and conditions of the following Association Documents:

- a. Declaration of Covenants and Restrictions
- b. First Amendment to Declaration of Covenants and Restrictions
- c. Parking Rules & Regulations

Dated: _____ Purchaser/Lessee Signature: _____

Purchaser/Lessee Print Name: _____

Dated: _____ Purchaser/Lessee Signature: _____

Purchaser/Lessee Print Name: _____

Dated: _____ Purchaser/Lessee Signature: _____

Purchaser/Lessee Print Name: _____