

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 <u>each applicant</u> (unless married) and payable to GRS Community Management in the form of money order or cashier's check.
- Purchaser(s) shall pay a <u>working capital fund equal to twice the monthly assessments</u> 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 <u>Lot Owner MUST</u>
	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.
	OVAL REQUIRED – Application, fees and all applicable documentation must be mailed, or hand delivered
to GR	S Community Management at the address indicated above.

Please visit <u>grsmgt.com > Palm Island Villas at Wilton Manors Homeowners' Association, Inc. > Association</u> **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.

LEASE END DATE:

SALE CLOSING

DATE:

Please print legibly and complete all the sections.

LEASE BEGIN DATE:

LINIT II	NFORMATION					
PROPERTY ADDRESS	NFORMATION	MOVE-IN DATE				
CURRENT OWNER NAME		CONTACT#				
APPI ICAN	IT INFORMATION					
APPLICANT NAME	C0-APPLICANT NAME					
PRIMARY CONTACT #	PRIMARY CONTACT#					
EMAIL	EMAIL					
CURRENT MAILING ADDRESS	CURRENT MAILING ADDR	ESS				
CITY-STATE-ZIP	CITY-STATE-ZIP	CITY-STATE-ZIP				
EMERGENCY CONTACT NAME & TELEPHONE	EMERGENCY CONTACT N	EMERGENCY CONTACT NAME & TELEPHONE				
MARTIAL STATUS MARRIED () SINGLE ()	MARTIAL STATUS	MARRIED () SINGLE ()				
NAME	RELATIONSHIP	DOB				
NAME	RELATIONSHIP	DOB				
NAME	RELATIONSHIP	DOB				
REALTOI REALTOR'S NAME PHONE #	R INFORMATION 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
MONTHLY INCOME	MONTHLY INCOME

VEHICLE INFORMATION

(Please refer to the Association's Rules & Regulations)

MAKE	MODEL	COLOR	STATE	TAG #
MAKE	MODEL	COLOR	STATE	TAG #

PET INFORMATION

(Only two (2) dog or two (2) cats (or one (1) of each) is permitted in the unit.

(Write none if no pets)

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

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 thisday of amend, and modify that certain Lease date		
owner is delinquent in any monetary of the tenant to pay to the association the the Association. The demand must be in	bligation to the Association future monetary obligation writing. If the tenant failed a Statutes. The unit own	sessments: Tenant Occupancy: Where an on, the Association can make a demand for ions related to the Association unit owed to ils to comply, the Association may have the er shall give the tenant a credit against rent e Association.
special) or other charges to the Associathe tenant shall be obligated to pay the	ation, the Association may rent required under the lean paid in full. During the	ment of assessments (regular, general, or y notify the tenant. Upon such notification, lease to the Association, until all delinquent period of time the tenant is paying the rent t for non-payment of rent.
LANDLORD:		
Please Print Name	Signature	Date
TENANT:		
Please Print Name	Signature	
TENANT:		
Please Print Name	Signature	Date



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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 ser within the last six (6) months, and accurately show the p		
I. Type of Pet(s):	Weight:	Color:
Breed:	Tag Number:	
II. Veterinarian Reference: (Please attach a current cert veterinarian within the past thirty (30) days.)	ificate of vaccination/hea	alth certified by a licensed
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.

- 6. Resident warrants that the pet(s)/animal(s) have no history of causing physical harm to persons or property, such as attacking, biting, scratching, chewing, etc. and further warrants that the pet(s)/animal(s) have no vicious history or tendencies.
- 7. Resident understands and agrees that each year the pet/animal is kept on the property; a valid certification from a licensed veterinarian shall be submitted to the association showing that the pet/animal has current vaccinations.
- 8. The Resident acknowledges in writing that Resident will comply with the guidelines established by the association regarding pets.
- 9. If Resident fails to comply with these requirements by failing to have his/her pet(s)/animal(s) registered (this shall include but not limited to replacement pets) and approved in advance or has a pet on the property or premises without approval and is later discovered, (whether the pet belongs to Resident or another), then the association shall have the right to remove such pet/animal immediately without notice. If any action is necessary to remove the animal, the prevailing party shall be entitled to its reasonable attorney's fees and costs, if any.
- 10. The pet/animal shall not be deemed approved until Resident receives a written confirmation from the association approving same.
- 11. If any action is necessary to require compliance with this agreement, the prevailing party shall be entitled to its reasonable attorney's fees and costs, if any.
- **C.** Association and Resident agree, notwithstanding initial compliance with the pet registration, that should Resident receive written notice from Association that a pet/animal is deemed undesirable, for whatever reason, Resident shall forthwith remove the undesirable pet/animal from the premises. Any failure to remove the pet/animal after written notice shall be a material breach of this agreement.
- **D.** Disapproved pets/animals shall not be allowed to re-enter the property or the premises.
- **E.** Any approval of a pet given by Association to Resident, prior to or after Resident takes possession of his/her premises, shall be strictly subject to the terms of this agreement/registration, and any such approval given shall require compliance herewith notwithstanding the fact that this addendum may not be resigned after a pet is approved or added.

Print Resident Name	Resident Signature	Date
APPROVED THIS DAY OF	, 20	
Ву:		Title:

Authorized Signature of Palm Island at Wilton Manors HOA, Inc.

PALM ISLAND AT WILTON MANORS HOMEOWNERS' ASSOCIATION, INC. PROSPECTIVE OWNER/LESSEE ACKNOWLEDGEMENT

The	undersigned	being	a	prospective	Owner	or	Lessee	of	the	followir	ig Prope	rty	Address
					, in Pal	m Isl	and at	Wilto	n Ma	nors Hor	neowners	' As	sociation
Inc.	acknowledges	that I/V	Ve	have read, ur	nderstand	, and	agree	to fo	llow a	and abide	e by all t	he t	erms and
cond	litions of the fo	llowing A	٩sso	ciation Docun	nents:								
k	DeclarationFirst AmendParking Rule	dment to	De	claration of Co		nd Re	estrictio	ns					
Date	d:			Purchaser/Le									
Date	d:			Purchaser/Le									
Date	d:			Purchaser/Le									