Highland Lakes Villas on the Green I Condominium Association, Inc.

Approval Request for Ownership Transfer or Rental

This request for approval must be in the possession of the Board of Directors twenty (20) days prior to closing or commencement of lease

NO PETS 55+ community

Purchase_____ or Lease_____ Date of Closing/Occupancy:_____

Street Address:_____

Realtor Information:_____

Purchaser(s) or Tenant(s) represent that the following information is true and hereby correct and hereby consents to the Association's inquiry and investigation concerning this or any other information provided or deemed necessary for approval request. Applicant agrees that a background check may be obtained and any other verification of information regarding this application. Any material misstatements as to the leasee's or buyer's statements contained herein, may be grounds for denial.

LIST ALL OWNERS/OCCUPANTS (Maximum of 2 residents per bedroom, at least one resident must be age 55+ and provide proof)

Name:_____Phone:_____

***Date of Birth:_____Email:_____**

Name:_____Phone:_____

***Date of Birth:_____Email:_____**

*** Please provide a photocopy of the Driver's License**

LIST ALL AUTOMOBILES:

Year/Make/Model:_____Color:_____Tag:_____

Year/Make/Model:_____Color:_____Tag:_____

RESIDENCE HISTORY:

Present Address:_____Own or Tenant

Emergency Contact Information: (List any person(s) in case a medical or building emergency)

Name:_____Phone #:_____

Name:_____Phone #:_____

Buyer's Information:

The Unit Will Be: Permanent Resident_____ Seasonal Resident_____ Rental_____

Mailing Address After Closing:_____

Monthly Maintenance Fee (Monthly Assessment) to be paid by: Check_____ Auto Debit (ACH)_____

Purchaser(s) / Tenant(s) state that a copy of the Condominium Documents, including Declaration of Condominium Association Articles of Incorporation, By-Laws and Rules and Regulations have been received, read and understood. Purchaser(s) / Tenant(s) hereby agree to abide by all of the conditions and terms herein and all rule and regulations officially enacted hereafter by the Highland Lakes Villas on the Green I Condominium Association, Inc.

Approval of this request is subject to all financial obligations to the Association, including but not limited to, maintenance fees, late charges, special assessments, legal fees having been paid in full, at or prior to closing. The Board of Directors has up to twenty (20) days to approve or deny this application.

NO OCCUPANCY ALLOWED UNTIL AN INTERVIEW AND APPROVAL HAS BEEN GRANTED BY THE BOARD.

_____ _____

Purchaser / Tenant Signature **Date**

_____ _____

Purchaser / Tenant Signature **Date**

Must be presented with this application: $100 Non-Refundable Application Fee, Copy Driver's License & Copy of Purchase Agreement / Lease Agreement.

Return to: Monarch Association Management, Inc.
500 Alternate 19 South (500 Palm Harbor Blvd-for GPS purposes)
Palm Harbor, FL 34683
(727) 204-4766

- Association Use- -

Date Rec'd_____ Fee Rec'd_____ Agreement Rec'd_____

Date of Interview_____ Interviewer's Signature_____

Board Signature_____Date_____

Approve:_____ Deny:_____ Date:_____

If Denied, reason:_____

Landlord/Owner Name_____ **Date:**_____

Rental Property Address _____

(*Use Black Ink and Print Clearly*) **(*Rental Amount: $_____*)**

Standard Services

☐ National Credit Single ☐ National Credit Married ☐ Tenant Pay Form Attached

Additional Services (per applicant)

☐ ☐

☐ State of FL Criminal ☐ State of _____ Criminal ☐ National Criminal

I/We hereby allow Tenant Check and TENANT SCREENING NOW and/or the property owner/manager to inquire into my/our credit file, criminal, rental and employment history. I/We understand that on my/our credit file it will appear that Tenant Check and TENANT SCREENING NOW has made an inquiry. I/We cannot claim any invasion of privacy against them now or in the future. **If an incorrect SS# is submitted applicant will be subject to a second application fee. All** application fees are non-refundable. Your deposit is refundable if you are not accepted, however, if you are verbally accepted and then decide not to take the property your deposit in **not** refundable.

Applicant

☐ Single ☐ Married ☐ Married to Co-Applicant

SS# _____

Full Name _____

Date of Birth _____

Current Address _____

Email _____ Ph # _____

Landlord Name _____

Phone # _____ Rent $ _____

Employer _____

Occupation _____

Supervisor _____

How long _____ Work # _____

Gross Monthly Income $_____ (before tax)

Monthly Debt (loans/car payment) _____

Collections on your credit report? ☐ Yes ☐ No

Are you currently in the military? ☐ Yes ☐ No

Evictions? ☐ Yes ☐ No (Year _____)

Bankruptcy last 5 years Yes No

DL # _____ (State _____)

Signature _____

Co-Applicant

☐ Spouse ☐ Roommate or ☐ Co-Signer

SS# _____

Full Name _____

Date of Birth _____

Current Address _____

Email _____ Ph # _____

Landlord Name _____

Phone # _____ Rent $ _____

Employer _____

Occupation _____

Supervisor _____

How long _____ Work # _____

Gross Monthly Income $_____ (before tax)

Monthly Debt (loans/car payment) _____

Collections on your credit report? ☐ Yes ☐ No

Are you currently in the military? ☐ Yes ☐ No

Evictions? ☐ Yes ☐ No (Year _____)

Bankruptcy last 5 years Yes No

DL # _____ (State _____)

Signature _____