BERMUDA VILLAGE ASSOCIATION, INC.

RENTAL/LEASE/ RESALE PACKAGE

IMPORTANT NOTICE-PLEASE READ CAREFULLY

- The enclosed application must be <u>completely</u> filled out in order for it to be considered and processed.
- The entire package will be returned if any information or attachments requested are missing. This will result in a delay for scheduling the required interview and approving this application.
- The entire package will be returned without the required checks.
- Submit one (1) <u>photo copy</u> set of the completed application package along with the <u>original</u> and return to this office.
- Following submission of the completed package, an interview will be scheduled. Allow a minimum of fifteen (15) days following submission of the application package for processing to allow the interview to be scheduled. Please observe our closing or move-in date accordingly.

Bermuda Village Association, Inc. c/o Associated Property Management (APM) 8135 Lake Worth Rd. Lake Worth, FL 33467

> Telephone: 561-588-7210 Fax: 561-588-2411

The Board of Directors of Bermuda Village Association, Inc. is responsible for approval or rejection/disapproval of the application. As the Associations agent, Associated Property Management is responsible for processing the application. Please schedule your closing or move-in date accordingly.

BERMUDA VILLAGE ASSOCIATION, INC. c/o Associated Property Management 8135 Lake Worth Rd., Lake Worth FL 33467

APPLICATION FOR SALE/LEASE

1. THIS APPLICATION MUST BE COMPLETED IN DETAIL BY THE PROPOSED BUYER OR LESSEE AND RETURNED TO:

Associated Property Management 8135 Lake Worth Road Lake Worth, FL 33467 561-588-7210 FAX: 561-588-2411

(IF ANY QUESTION IS LEFT BLANK, THE APPLICATION WILL BE RETURNED.)

- PLEASE ATTACH A COPY OF THE SALES CONTRACT OR LEASE AGREEMENT.
- 3. PLEASE ATTACH A NON-REFUNDABLE APPLICATION FEE OF \$100.00 PAYABLE TO BERMUDA VILLAGE ASSOCIATION, INC. A NON-REFUNDABLE (PER UNMARRIED APPLICANT) PROCESSING FEE OF \$75.00 PAYABLE TO ASSOCIATED PROPERTY MANAGEMENT (APM), IN ADDITION TO A NON-REFUNDABLE SCREENING FEE OF \$76.00 PER APPLICANT AND ANY PERSON TO BE LIVING IN THE UNIT 18 YEARS OF AGE OR OLDER. All checks payable to APM must be in the form of a MONEY ORDER or CASHIER'S CHECK.
- 4. UNIT OWNERS MUST SUPPLY BUYERS WITH A COPY OF THE DOCUMENTS FOR BERMUDA VILLAGE ASSOCIATION, INC.
- 5. LEASES **CANNOT** BE FOR A PERIOD OF LESS THAN 3 MONTHS.
- 6. THERE IS AN OCCUPANCY RESTRICTION OF TWO PERSONS PER BEDROOM (i.e.: TWO BEDROOM HOUSE: 4 PERSONS; THREE BEDROOM HOUSE: 6 PERSONS).
- 7. **NO** COMMERCIAL VEHICLES, BOATS, TRAILERS, CAMPERS, O R MOTORCYCLES ARE ALLOWED TO BE PARKED ON THE PROPERTY. PERSONAL STREET VANS, PERSONAL TRUCKS OF ½ TON CAPACITY OR SMALLER CAN BE PARKED ONLY IN THE PARKING STALLS.
- 8. ONLY HOUSEHOLD PETS (DOGS and CATS) ARE ALLOWED. NO PIT BULLS, BIRDS OR REPTILES.
- 9. THIS COMPLETED APPLICATION MUST BE SUBMITTED TO THE ASSOCIATION OFFICE **NO LATER THAN** 15 DAYS PRIOR TO THE DESIRED DATE OF OCCUPANCY.
- 10. SUBMIT A LEGIBLE COPY OF DRIVERS LICENSE AND SOCIAL SECURITY CARD. THIS INFORMATION IS REQUIRED TO COMPLETE THE BACKGROUND CHECK.

BERMUDA VILLAGE ASSOCIATION, INC. c/o Associated Property Management 8135 Lake Worth Rd., Lake Worth FL 33467

APPLICATION FOR PURCHASE/LEASE

(TO BE COMPLETED BY PROSPECTIVE PURCHASERS/LESSEES)

Sale/Rental Unit Address:		
Name of Current Owner:		
Permanent Address of Owner:		
Email Address:		
	SSN:	
DOB:		
Name of Co-Applicant:	SSN:	
DOB:		
Applicants Address:		
City, State, Zip:		
Email Address:	Email Address:	
Phone #:		
Please check only one: • Renewals		
Rental Application	Rental Period from:	to
 Sale Application 	Desired closing date:	
Please list all occupants who w	vill reside at the residence if approved:	
Name	Relationship	Date of Birth
Age of oldest occupant:	Age of youngest occupant:	
How many pets?	_	
Type: Breed:		
Tyne: Breed:	Weight:	

How many v	ehicles do you ha	ve?			
Year:	Make:	Mode	l:	State:	Plate #:
Year:	Make:	Mode	l:	State:	Plate #:
Name of Att	orney, Realtor or	Title Compan	y:		
Address:					
Local Phone	#:		-		
In case of er	mergency please o	ontact:			
- ,	Contacts Phone #:				
	ferences: Please li				
1					
2					
3					
Bank Refere	nces: Please list 1	or 2 with com	nplete addresse	es and accou	nt numbers
Bank:			Acct	:#:	
Bank:			Acct	:#:	
Present Emp	,				
			Phone ()	
			/		
Previous Em	ployer				
			Phone ()	
Position	oyed/)	

Spouse Present Employer				
City & St		Phone ()	
Position				
Dates Employed/	To	/		
Income Per	Mgr			
Spouse's Previous Employer _				
City & St		Phone ()	
Position				
Dates Employed/	To	/		
Income Per	Mgr.			

** If for sale, applicant agrees to obtain a copy of the "Declaration" from the Homeowner. If they do not receive a copy from the homeowner they can request a copy from APM. One or both Sale and/or Rental applicant shall read, adhere to and sign the Rules and Regulations receipt acknowledgement form that is part of this application. The appropriate application fee indicated on page two on the application instructions form and a copy of the Lease/Rental agreement or Sale contract MUST ACCOMPANY THE SUBMISSIONS OF THIS APPLICATION before processing can begin. Please also be aware of the following:

- Subleasing is not allowed
- Leasing with "Options to Purchase" are not permitted
- Lease renewals must receive association approval

BERMUDA VILLAGE HOMEOWNERS' ASSOCIATION

AGREEMENT AND INFORMATION RELEASE

- 1. I hereby agree for myself and on behalf of all persons who may use the home which I seek to purchase or lease.
 - a. I will abide by all the restrictions contained in the By-Laws, Rules and Regulations, and Restrictions, which are or may in the future be imposed by BERMUDA VILLAGE ASSOCIATION, INC.
 - b. I understand that pets (if any) must be kept on a leash and all solid waste must be removed.
 - c. I understand that sub-leasing or occupancy of this unit in my absence is prohibited.
 - d. I understand that I must be present when any guests, visitors or children who are not permanent residents occupy the unit.
 - e. I understand that any violation of the terms, provisions, conditions and covenants of the BERMUDA VILLAGE ASSOCIATION, INC. documents provides cause for Immediate action as therein provided, or termination of the leasehold under appropriate circumstances,
- 2. I understand that the acceptance for Purchase/Lease of a unit is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of Information of these forms will result In the automatic rejection of this application. Occupancy prior to approval is prohibited.
- 3. I understand that the Board of Directors of BERMUDA VILLAGE ASSOCIATION, INC. may cause to be instituted such an Investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors or its agent to make such investigation and agree that the information contained in this and the attached application may be used In such investigation and that the Board of Directors and Officers and agents of BERMUDA VILLAGE ASSOCIATION, INC. itself shall be held harmless from any action or claim by me In connection with the use of the Information contained herein or any investigation conducted by the Board of Directors or its agents.

In making the foregoing application, I am aware that the decision of BERMUDA VILLAGE ASSOCIATION, INC., will be final and no reason will be given for any action taken by the Board. I agree to be governed by the determination of the Board of Directors.

Applicant's Signature	Applicant's Signature

CHECKLIST

- 1. If any question is left blank, this application may not be approved. This application is subject to approval.
- 2. Attach a non-refundable fee of \$100.00 payable to BERMUDA VILLAGE and non-refundable processing fee of \$75.00 along with the non-refundable screening fee of \$76.00 per applicant over 18 payable to ASSOCIATED PROPERTY MANAGEMENT. ALL PAYMENTS MUST BE IN THE FORM OF A MONEY ORDER OR CASHIER'S CHECK.
- 3. Please enclose a copy of the Lease/Sales Contract with this application.
- 4. Please submit a copy of Driver's License and Social Security card.

I/We declare the above Information to be true and correct.

I/we authorize the landlord, or agent(s) to verify it and obtain a consumer credit report.

I/We understand an investigation of my/our background will be conducted to determine my/our character, general reputation, personal characteristics, mode of living and specifically authorize ASSOCIATED PROPERTY MANAGEMENT to such an application.

I/We agree to abide by the Rules and Regulations of the Association.

Signed	Date		
Signed	Date		



AUTHORIZATION OF A CONSUMER AND/OR INVESTGATIVE CONSUMER REPORT

I, the undersigned consumer, do hereby authorize CoreLogic SafeRent to procure a consumer report and/or investigative consumer report on me.

I understand that this authorization and release shall be valid for subsequent consumer and/or investigative consumer reports during my period of employment. These abovementioned reports may include, but are not limited to, information as to my character, general reputation, and personal characteristics, discerned through employment and education verifications; personal references; personal interviews; my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; any other public record. I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to CoreLogic SafeRent by and through its' independent contractor, including, but not limited to any and all courts, public agencies, law enforcement agencies and credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources. I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any Investigative consumer report of which I am the subject upon my written request to CoreLogic SafeRent, if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C. 1681et. seq. and Cal. Civ. Code 1786.

Signature:_				
Date:				
Print Name	:			

FOR CANADIAN RESIDENTS ONLY

Disclosure and Release of Information
Authorization Consumer Report/Investigative
Consumer Report
Important: Please read carefully

As an applicant to rent or lease certain property, house, apartment, or condominium, you are a consumer rights under the Fair Credit Reporting Act. When evaluating you as a tenant, a consumer report or an investigative consumer report may be obtained from a consumer reporting agency and may be obtained at any time during the application process or to decide whether to renew your lease or otherwise continue the landlord/tenant relationship.

I authorize CoreLogic SafeRent, to obtain information from all personnel, educational institutions, government agencies, companies, corporations, credit reporting agencies, law enforce1nent agencies at the federal, state or county level, relating to my past activities, to supply any and all information concerning my background. The information obtained may include, but is not limited to, prior landlords, residential, previous employment verification, credit reports, driving history, and criminal history records.

I understand that a Consumer Report or Investigative Consumer Report may be prepared summarizing this information. The report may include information obtained through personal interviews regarding my character, general reputation personal characteristics and/or mode of living. I may also have the right to request additional disclosures regarding the nature and scope of the investigation as well as a written summary of my rights under the Fair Credit Reporting Act. If requested, consumer reporting agency will explain the contents of my file. I understand that proper identification will be required and that I should directly request to:

I understand that by requesting this information, no pro1nise of rental or lease is being made. I also understand that a photocopy of this authorization be accepted with the same authority as the original; and that if accepted as a tenant by [your company's name], this authorization will remain in effect throughout such lease. I understand that the information requested below regarding date of birth, race and sex is for the sole purpose of gathering the above information accurately, and will not be used to discriminate against me in violation of any law.

READ. ACKNOWLEDGED AND AUTHORIZED

Signature		Date			
NOTE: I am providing the f	ollowing voluntarily.	PLEASE PRINT CLEA	<u>ARLY</u>		
NAME_					
First	Middle (Full)	Last		Maide	en
OCIALSECURITY#		_ DATE OFBIRTH (for ID purpo	ses only)_		
			MO	DAY	YR
EX F	ACE	_ DRIVER'S LICENSE #:			
applicants Address:					
City, State, Zip:					



Corporations that will be purchasing a home must be listed on the Purchase Application

along with the name of the person who is completing the Application.

Failure to do so may result in a delay in the processing of the submitted Application.

THIS IS A CORPORATION PURCHASE

THIS IS NOT A CORPORATION PURCHASE

Signature:

Date:

Date"

Thank you,

Associated Property Management

Of the Palm Beaches, Inc.

BERMUDA VILLAGE ASSOCIATION, INC. ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH ROAD LAKE WORTH, FL33467

OCCUPANCY APPROVAL CERTIFICATE

Unit Number		
Nature of Occupancy (c	check one)Purchase Rental/Lease *Term	
	Full Name(s)	
_		-
_		_
The person(s) listed a	above as buyer(s) or tenant(s) has/have been interviewed by the men	– nber of the Board of
indicated they have re Regulations, and if pur	ow. The named Director acknowledges the buyer(s) or tenant(s) interview read, understood and agreed to abide by the Bermuda Village Association urchasing, have received from the seller a copy of the Association Docum The named Director also certifies that all questions rose by the buyer(s) of een answered.	, Inc. Rules and ents which they
occupancy in Bermud	, the Directors conducting the interview approves the buyer(s) or tenar and Village, agrees to advise the Board of Directors of the approval a for recording of the approval in the meeting minute, and auth a copy of this Occupancy Approval Certificate to the named buye either thereof.	at the next regularly orizes the Property
Director Signature		
	Occupancy Approval	