

**Colonial Palms Condominium Association, Inc.
1180 SW 36 Avenue, Suite 100, Pompano Beach, FL 33069
Phone: (954) 582-0220 Fax: (954) 582-0223**

APPLICATION FOR OWNERSHIP/ RESIDENCY (BUYER)

This application must be complete. The application will not be processed without all the required documentation.

The Governing Documents for the Colonial Palms Condominium Association, Inc. (the “Association”) **require prior written approval** of any person purchasing any unit within the Colonial Palms, Deerfield community. All prospective owners must receive approval by the Association prior to intended date of occupancy or closing. Please carefully read the following:

In accordance with the Florida Statutes and the Bylaws and Rules and Regulations for the Colonial Palms Condominium Association and any applicable rules duly adopted by the Board of Directors of Colonial Palms Condominium Association the following procedures are to be followed when purchasing a home located in the Colonial Palms, Deerfield community.

Any homeowner submitting an approval of sale/transfer application must be current with all assessments prior to the lease application being considered for approval. Please read the Rules & Regulations, Bylaws, and other governing documents for the Colonial Palms Condominium Association.

PURCHASE REQUIREMENTS AND INSTRUCTIONS

ALL ITEMS BELOW MUST BE SUBMITTED TOGETHER TO BE CONSIDERED TO:

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1. Completed "Application for Residency" form. ATTACHED
2. A copy of the purchase/sales contract.
3. Pet registration form completed if applicable.
4. The Condominium Association can disapprove a sales contract if:
 - An unsatisfactory background check is found regarding the purchaser.
5. Attach a **\$100.00 non-refundable check** for the application fee made payable to Colonial Palms Condominium Association; this includes one background and credit check. **An additional check for \$75.00** is required for each person over the age of 18 who will be residing in the unit to cover the background and credit check for each of them.
6. The Association requires that this completed application be presented for consideration at least thirty (30) days prior to closing date.
7. The Association requires a personal interview prior to final approval. It is the obligation of the applicant to be available for this interview.
8. The Association strictly prohibits occupancy and closing prior to interview.
9. All maintenance fees and assessments must be paid in full prior to closing.
10. The prospective owner must submit a copy of their Driver's License or government-issued identification for all applicants.

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PLEASE PRINT

DATE: _____ ADDRESS: _____

BUYER INFORMATION

Buyer Name (AS IT WILL APPEAR ON THE TITLE): _____

Realtor: _____ Phone#: _____

APPLICANT(S) INFORMATION:

Name(s): _____

Telephone #'s: _____ Date of Birth: _____ Social Security#: _____

Email: _____

Please name all occupants and relationship to Buyer (provide age of children): Please provide the social security # and date of birth for all applicants over 18.

VEHICLES:

Make of Vehicle	Model	License Plate #	Color	State
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

LICENSED DRIVERS:

Name: 1. _____ License #: _____ State: _____

Name: 2. _____ License #: _____ State: _____

Name: 3. _____ License #: _____ State: _____

Name: 4. _____ License #: _____ State: _____

PETS: YES NO (If yes, please complete the attached pet registration form)

WORK HISTORY: *Applicants 1 and 2.*

Employer: 1. _____ 2. _____

Phone: 1. _____ 2. _____

Address: 1. _____ 2. _____

Position: 1. _____ 2. _____

EMERGENCY CONTACT INFO: _____**CRIMINAL BACKGROUND:**

Have you [or other applicant] ever been convicted of a state or federal offense? YES () NO ()

Have you [or other applicant] ever been convicted of a felony in the past 7 years? YES () NO ()

Are you [or other applicant] presently awaiting trial on any criminal offense? YES () NO ()

If the answer is 'Yes' to any of the above, give applicant's name, dates, name of court and details of conviction on a separate sheet of paper.

APPLICANT ACKNOWLEDGEMENT

By my/our signature(s) below, I/we hereby certify:

1. That I/we have received, read, understand and agree to abide by all the Rules & Regulations and the governing Documents of Colonial Palms Condominium Association.
2. That all of the information contained in this application is true and complete and that I/we understand and agree that False or Misleading information given in this application constitutes grounds for rejection of this application and revocation of my right to own or reside on this property.

APPLICANT ACKNOWLEDGEMENT continued

3. I/we give my/our permission for a nationwide Law Enforcement Background investigation and credit history verification and understand that the Colonial Palms Condominium Association may deny the ownership based on reasonable factors. Accordingly, I agree that the Association and its officers and agents shall be held harmless from any action or claim by me in connection with the use of the information contained herein or resulting from any investigation.
4. That I/we understand and agree the unit cannot be sub-leased by either the owner or the leaseholder. That no persons other than those shown on this application will reside in the unit and I/we agree that anyone moving into the unit at a later date will be registered with the Association.
5. **That pursuant to Florida Statutes I/we understand and agree upon receipt of notice from the Association that my monthly rent payments will be sent directly to the Association, made payable to the Association until any assessments, charges, late fees and attorney fees due and owing to the Association by the owner/landlord are paid in full. I also understand that failure to do so will result in my eviction from the unit as prescribed by the State of Florida.**

Applicant Signature: _____ **Date:** _____

Applicant Signature: _____ **Date:** _____
(Each applicant over 18 years of age must sign this section)

ACKNOWLEDGEMENT OF OWNER(S)

1. That I/We hereby authorize the Association to evict a tenant at my/our (owners) expense in any case where the tenant fails to abide by the Florida Statutes and the Association's Governing Legal Documents and Rules & Regulations, which were provided to the applicant. I agree to provide an Application and Investigation Fee for anyone moving in under this lease or anyone visiting as a guest in the unit for longer than three weeks.
2. That I/We as Owner(s) are responsible for the tenant and/or guests of such tenant, in regard to unpaid violation fines, any costs related to damages to community property and/or fees paid to the Association's attorney relating to tenant and/or guests of tenant.
3. I/We agree that upon receipt of Notice that all monthly rent payments will be sent directly to the Association by the tenant until any assessments, charges, late fees and/or attorney fees, due and owing to the Association by the owner/landlord are paid in full, pursuant to the Colonial Palms Condominium Association, Inc. governing documents and Florida Statutes.

Signature of Owner: _____ **Date:** _____

Signature of Owner: _____ **Date:** _____

OFFICE USE ONLY: APPROVED [] DENIED [] DATE: _____

Reason denied/comments: _____

Agent for the Board Signature: _____ **Date:** _____

PET REGISTRATION FORM

Buyer: _____

Address: _____

Type of Pet(s) (please circle one): DOG CAT BIRD OTHER _____

Note: Limit 2 pets per unit and maximum weight 20 pounds each

Pet's Name: _____ Pet's Age: _____

Pet's Weight: _____ Pet's License/Tag Number: _____

Breed (*Be specific – give complete description, color, etc.*):

Pet's Name: _____ Pet's Age: _____

Pet's Weight: _____ Pet's License/Tag Number: _____

Breed (*Be specific – give complete description, color, etc.*):

PLEASE ATTACH PET PHOTO(S) HERE