

# Grandview Palace Condominium Association

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Unit #: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Checklist for \_\_\_Lease or \_\_\_Purchase:

- Application \_\_\_ # of Applicants (signed by everyone on lease)
- \$50.00 Application Fee Per Applicant (**Money Order Only - Separate Money Orders**)
- \$100.00 Dumpster Fee (**Money Order Only - Separate Money Orders**)
- \$500.00 Deposit (**Money Order Only - Separate Money Orders**)
- Copy of \_\_\_Lease or \_\_\_Addendum or \_\_\_Purchase Contract
- Verification of Income (If self employed, Tax Return of the Company)
- 2 Months of Bank Statements
- Letter of Verification of Employment (Signed)
- 2 Personal Reference Letter (Signed)
- Copy of \_\_\_License or \_\_\_Passport
- Social Security Number is included in Application
- Landlord Verification Letter (Signed)

Office Use Only:

- Background Report
- Make sure owner has zero balance
- Give manager file for approval (Must be done before next step is taken)
- Interview
- Picture
- Give Approval or Denial Letter
- FOB(s) (payment)
- Car Ins & Registration
- Decal (payment)

GVP Signoff Initials: A.P. \_\_\_\_\_ B.B. \_\_\_\_\_ BOD \_\_\_\_\_

# Grandview Palace Condominium Association, Inc.

7601 E. Treasure Dr., Suite 25, North Bay Village, Florida 33141

## APPLICATION FOR PURCHASE

- The application process will begin once all proper documentation is submitted. **IF THE DOCUMENTATION LISTED BELOW IS NOT SUBMITTED, YOUR APPLICATION WILL NOT BE PROCESSED.**
- All documentation must be submitted to the Association at least fifteen (15) business days prior to the expected closing date or occupancy date.
- All applicants must be available for a personal interview prior to final approval (except for out of state applicants with a score of C or higher). It is requested that children also be present.

**OCCUPANCY PRIOR TO FINAL APPROVAL AND/OR PERSONAL INTERVIEW IS PROHIBITED!**

<input type="checkbox"/>	<b><u>APPLICATION:</u></b> The proposed Buyers(s) must complete this application completely. If any questions are left blank, this application will be returned; not processed and not approved. <b>Application fee is \$50 per applicant made payable to Grandview Palace Condominium.</b>
<input type="checkbox"/>	<b><u>PURCHASE CONTRACT:</u></b> Upon submitting this application, a legible copy of the purchase contract must be included
<input type="checkbox"/>	<b><u>NON-REFUNDABLE DUMPSTER FEE OF \$100.00 (PER UNIT):</u></b> Payable to "Grandview Palace Condominium" in the form of a money order or cashier's check at the time of application.
<input type="checkbox"/>	<b><u>VERIFICATION OF INCOME:</u></b> Applicant(s) must be able to verify income (eg. last 2 pay stubs), Note: If Score is C- (score of 581+) or below, need 3 mo. Bank statements. If self employed – Dept of State Registration, Occupational License, Tax Return
<input type="checkbox"/>	<b><u>VERIFICATION OF EMPLOYMENT, TWO (2) CHARACTER REFERENCE LETTER</u></b>
<input type="checkbox"/>	<b><u>VALID ID:</u></b> Driver's License, Social Security, State issued ID, and/or passport, plus picture of every resident
<input type="checkbox"/>	<b><u>PET POLICY:</u></b> Owners are allowed to have 1 dog up to 10 pounds. Renters are not permitted to have or keep, even temporarily, dogs of any kind in their units.
<input type="checkbox"/>	<b><u>AUTHORIZATION TO RELEASE BANKING, CREDIT, RESIDENCE AND EMPLOYMENT INFORMATION</u></b> – The undersigned acknowledges that the Association, or Agent assigned by the Association may investigate the information provided by the above-signed and agrees that full disclosure of any information mentioned herein including residential, employment, bank information, personal and credit related may be made to the Association, and the unit owner of record. <b>(Please fill out attached form)</b>

- Association will conduct a credit and background check on all applicants.
- The Management Office must have written confirmation for any other person to occupy the unit on a permanent basis. Occupancy restrictions are strictly enforced. Should you have any questions, please contact the Management Office at 305-861-7512. Occupancy restrictions are as follows:
- Occupancy Limits
  - **One bedroom Unit- No more the (2) Adults and total of (3) persons/occupants**
  - **Two bedroom Unit: No more than (4) adults and total of five (5) persons/occupants**

I/WE, \_\_\_\_\_ HAVE READ AND UNDERSTAND THE INFORMATION ABOVE.

\_\_\_\_\_  
Primary Applicant/ Occupant      Date

\_\_\_\_\_  
Additional Applicant/ Guarantor      Date

# Grandview Palace Condominium Association

## APPLICATION FOR PURCHASE

### PRESENT UNIT OWNER INFORMATION

OWNER NAME		DAY PHONE #	
OWNER EMAIL		EVE PHONE #	

### REAL ESTATE AGENT INFORMATION

AGENT NAME		WK PHONE #	
AGENT EMAIL		CELL PH #	

### UNIT INFORMATION

CHECK: PURCHASE    LEASE

APARTMENT #		BD(S)	
SALE/RENT PRICE		BA(S)	
SECURITY DEPOSIT		PKG SPACE	
MOVE IN DATE		MOVE OUT DATE	

### ADDITIONAL OCCUPANT INFORMATION

NAME		RELATIONSHIP	
NAME		RELATIONSHIP	
NAME		RELATIONSHIP	

### EMERGENCY CONTACT INFORMATION (IN CASE OF FIRE OR ACCIDENT)

CONTACT NAME		PHONE #	
CONTACT NAME		PHONE #	

### AUTOMOBILE INFORMATION

YEAR		MAKE		MODEL		COLOR		TAG	
YEAR		MAKE		MODEL		COLOR		TAG	

**NOTE:** Applicant is required to provide a copy of the vehicle registration and insurance card

## APPLICATION FOR PURCHASE

 PRIMARY APPLICANT INFORMATION

 OCCUPANT/GUARANTOR INFORMATION

FIRST NAME		LAST NAME	
MIDDLE		SOCIAL SEC. #	
HOME PHONE		DATE OF BIRTH	
WORK PHONE		DRIVERS. LIC #	
MOBILE PHONE		DRIVERS LIC. STATE	
EMAIL ADDRESS:			
PRESENT ADDRESS:			
CITY		STATE & ZIP	
MONTHLY RENT/MORTG		# OF YEARS	
LANDLORD NAME		LANDLORD PHONE #	
PREVIOUS ADDRESS:			
CITY		STATE & ZIP	
MONTHLY RENT/MORTG		# OF YEARS	
LANDLORD NAME		LANDLORD PHONE #	
PRESENT EMPLOYER		ANNUAL SALARY	
POSITION		# OF YEARS	
EMPLOYER ADDRESS:			
CITY		STATE & ZIP	
MANAGERS NAME		MANAGERS PHONE #	

REFERENCES (PLEASE EXCLUDE FAMILY MEMBERS)			
NAME		NAME	
RELATION		RELATION	
PHONE #		PHONE #	

<b>HAVE YOU EVER BEEN CONVICTED IN THIS STATE OR ELSEWHERE OF ANY CRIMINAL OFFENSE THAT IS A MISDEMEANOR OR FELONY?</b>	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>IF YES, PLEASE EXPLAIN</b>	

**NOTE: GVP staff will call to verify previous landlord and employer information.**

# APPLICATION FOR PURCHASE

 PRIMARY APPLICANT INFORMATION

 OCCUPANT/GUARANTOR INFORMATION

FIRST NAME		LAST NAME	
MIDDLE		SOCIAL SEC. #	
HOME PHONE		DATE OF BIRTH	
WORK PHONE		DRIVERS. LIC #	
MOBILE PHONE		DRIVERS LIC. STATE	
EMAIL ADDRESS:			
PRESENT ADDRESS:			
CITY		STATE & ZIP	
MONTHLY RENT/MORTG		# OF YEARS	
LANDLORD NAME		LANDLORD PHONE #	
PREVIOUS ADDRESS:			
CITY		STATE & ZIP	
MONTHLY RENT/MORTG		# OF YEARS	
LANDLORD NAME		LANDLORD PHONE #	
PRESENT EMPLOYER		ANNUAL SALARY	
POSITION		# OF YEARS	
EMPLOYER ADDRESS:			
CITY		STATE & ZIP	
MANAGERS NAME		MANAGERS PHONE #	

REFERENCES (PLEASE EXCLUDE FAMILY MEMBERS)			
NAME		NAME	
RELATION		RELATION	
PHONE #		PHONE #	

HAVE YOU EVER BEEN CONVICTED IN THIS STATE OR ELSEWHERE OF ANY CRIMINAL OFFENSE THAT IS A MISDEMEANOR OR FELONY?	
<input type="checkbox"/> YES <input type="checkbox"/> NO  IF YES, PLEASE EXPLAIN	

**NOTE: GVP staff will call to verify previous landlord and employer information.**

**ADDENDUM FOR DRUG-FREE HOUSING**

In consideration of the execution or renewal of the dwelling unit identified in the contract, Applicant(s) agrees as follows:

1. Applicant, any member of the applicant's household, or a guest or other person under the applicant's control shall not engage in criminal activity, including drug-related criminal activity on or near property premises. "Drug-related criminal activity" means the illegal manufacture, sale, distribution, use or possession with intent to manufacture, sell, distribute, or use of a controlled substance (as defined in section 102 of the Controlled Substance Act 21 U.S.C. 802).
2. Applicant, any member of the applicant's household or a guest or the other person under the applicant's control shall not engage in any act intended to facilitate criminal activity, including drug-related criminal activity, on or near property premises.
3. Applicant or members of the household will not permit the dwelling unit to be used for, or to facilitate criminal activity, including drug-related criminal activity, regardless of whether the individual engaging in such activity is a member of the household or a guest.
4. Applicant or members of the household will not engage in the manufacture, sale or distribution of illegal drugs at any location, whether on or near property premises or otherwise.
5. Applicant, any member of applicant's household, or a guest or other person under the applicant's control shall not engage in acts of violence or threats of violence, including, but not limited to, the unlawful discharge of firearms on or near property premises.
6. VIOLATION OF THE ABOVE PROVISIONS SHALL BE A MATERIAL VIOLATION OF THE CONTRACT AND GOOD CAUSE FOR TERMINATION OF STAY. A single violation of any of the provisions of this added addendum shall be deemed a serious violation and a material non-compliance with the contract. Unless otherwise provided by law proof of violation shall not require criminal conviction, but shall be by a preponderance of the evidence.
7. In case of conflict between the provisions of this addendum and any other provisions of the lease, the provisions of the addendum shall govern.
8. This contract addendum is incorporated into the Contract executed or renewed this day between the Owner or the designated representative of the Owner and the Applicant.

\_\_\_\_\_  
OWNER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT

\_\_\_\_\_  
DATE

**APPLICATION FOR PURCHASE**

AN APPLICATION FEE OF \$100.00 PER APPLICANT WILL BE PAID FOR THIS APPLICATION. I/WE UNDERSTAND THAT THIS FEE IS NON-REFUNDABLE.

I/WE UNDERSTAND THAT THE BOARD OR MANAGEMENT OF THE ASSOCIATION WILL INSTITUTE AN INVESTIGATION OF MY/OUR BACKGROUND AS THEY DEEM NECESSARY. ACCORDINGLY, I/WE SPECIFICALLY AUTHORIZE THE BOARD OR MANAGEMENT TO MAKE SUCH INVESTIGATION AND AGREE THAT THE INFORMATION CONTAINED IN THIS AND ATTACHED REPORTS MAY BE USED IN SUCH INVESTIGATIONS, AND THAT THE BOARD AND/OR MANAGEMENT OF THE ASSOCIATION SHALL BE HELD HARMLESS FROM ANY ACTION OR CLAIM BY ME/US IN CONNECTION WITH THE USE OF THE INFORMATION CONTAINED HEREIN OR ANY INVESTIGATION CONDUCTED BY THE BOARD OR MANAGEMENT. I/WE UNDERSTAND THAT THE BOARD OR MANAGEMENT SHALL RELEASE THE INFORMATION OBTAINED TO THE CURRENT OWNER OF RECORD.

I/WE UNDERSTAND THAT THE BOARD AND/OR MANAGEMENT OF THE ASSOCIATION IS AUTHORIZED TO VERIFY THE REFERENCES, CONTACT PREVIOUS LANDLORD(S), AND EMPLOYMENT INFORMATION PROVIDED IN THIS APPLICATION AND REQUEST A CREDIT AND BACKGROUND CHECK. I/WE AUTHORIZE ALL AGENCIES AND PERSONS CONTACTED TO RELEASE INFORMATION IN DETAIL TO THE GRANDVIEW PALACE CONDOMINIUM ASSOCIATION AND/OR ITS MANAGEMENT COMPANY, AND THE UNIT OWNER OF RECORD.

I/WE UNDERSTAND THAT ANY INFORMATION NOT PROVIDED HERewith WILL BE SUBMITTED TO THE GRANDVIEW PALACE CONDOMINIUM ASSOCIATION WITHIN FIVE (5) DAYS FROM THE DATE BELOW.

**I UNDERSTAND THAT AS A NEW OWNER/TENANT I MUST RESPECT THE RULES AND REGULATIONS OF THE PROPERTY. IT IS MY RESPONSIBILITY THAT ALL MY VISITORS AND/OR TENANTS COMPLY WITH THE RULES AND REGULATIONS OF THE GRANDVIEW PALACE CONDOMINIUM.**

IN COMPLETING THIS APPLICATION, I/WE AM AWARE THAT THE DECISION OF THE ASSOCIATIONS BOARD OF DIRECTORS WILL BE FINAL AND NO REASON WILL BE GIVEN FOR ANY ACTION TAKEN BY THE BOARD OF DIRECTORS. I/WE AGREE TO BE GOVERNED BY THE DETERMINATION OF THE BOARD OF DIRECTORS.

I/WE ALSO AFFIRM, UNDER PENALTIES OR PERJURY, THAT THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT.

\_\_\_\_\_  
PRIMARY APPLICANT/OCCUPANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ADDITIONAL APPLICANT/GUARANTOR SIGNATURE

\_\_\_\_\_  
DATE