C/0 Seacrest Services, Inc. 2101 Centrepark West Drive Suite 110 West Palm Beach, FL 33409 T: 561-697-4990 Fax: 561-697-4779

LEASE APPLICATION

	//thr	u/ M DATES
-	ADDRESS OF PROPI	ERTY FOR LEASE
Current Ow	ner's Name	Contact Number
Current Ow	ner's Name	Contact Number
Potential Le	essee's Name	Contact Number
Potential Le	essee's Name	Contact Number
Potential Le	essee's Email Address	
Realtor's Na	ame	Realtor's Contact Number
Realtor's Er	mail Address	

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LEASE APPLICATION CHECK LIST

This <u>entire</u> application packet must be completed. Incomplete applications will be returned and not processed.

- FUNDS ARE TO BE SUBMITTED IN CASHIER'S CHECK OR MONEY ORDER FORMAT ONLY.
- UNIT OWNER MUST HAVE A ZERO BALANCE (NO FUNDS DUE TO THE ASSOCIATION). APPLICATION WILL NOT BE PROCESSED IF FUNDS ARE DUE TO THE ASSOCIATION.
- MINIMUM CREDIT SCORE OF 675 IS REQUIRED FROM SCREENING PROVIDER.

The following must also be included with the completed application:

- 1. Non-refundable application fee of \$150 per married couple or per adult applicant made payable to Colonial Club Condominium Assoc., Sec. I, Inc.
- 2. Refundable Security Deposit (Refundable upon written request at the end of the lease agreement after Common Area property inspection has been conducted and cleared).
 - 3-6 month lease \$400 payable to Colonial Club Condominium Assoc., Sec. I, Inc. 7-12 month lease \$1,000 payable to Colonial Club Condominium Assoc., Sec. I, Inc.
- 3. Copy of the executed lease contract (must allow a minimum 30 days for processing).
- 4. Copy of valid driver's license or government issued photo ID for any adult lessee/occupant.

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GENERAL ACKNOWLEDGEMENT FOR LEASE

All adult applicants <u>must</u> attend an interview/orientation with the Colonial Club Condominium Sales and Lease Committee <u>prior</u> to a final Committee/Board of Directors discretionary decision being rendered.

The **unit owne**r must ensure potential lessee/lessees are aware of the Governing Rules and Regulations of the entire Community.

Be advised that the Colonial Club Condominium Association, Sec. I, Inc. documents support the ability of the Association to deny purchase, residency and occupancy within the community if there are negative items as evidenced by the results of the screening process but not limited to the following:

- Criminal History involving a felony injuring a person or property
- A poor Financial History: having negative (bad) debt charges, bankruptcies and/or foreclosures
- Disruptive behavior as evidenced in this community or Criminal History or behavior not involving a felony that depicts disruptive behavior

Pets are not allowed within the Colonial Club (Service and emotional support animals are allo Association approval.	•
Service/Emotional Support animal requested? If yes, please complete the Request for Reasor Animal Registration Form (to be provided by the service of the se	nable Accommodation Service/Support
Signature of Lessee	Date

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APPLICANT AUTHORIZATION FORM FOR CRIMINAL AND CREDIT BACK-GROUND CHECK

By signing below, I consent/agree that I specifically authorize the Sales & Lease Committee/Board of Directors of Colonial Club Condominium Association, Sec. I, Inc. and Seacrest Services, Inc. to initiate an investigation to include criminal and credit background screening on me. I hereby authorize and request to have any current or previous landlord, employer, local, national and international police departments, financial institutions, agency, or any other person and or entity having knowledge of me, to furnish the bearer with any and all information in their possession regarding me in connection with this application for lease within the Colonial Club Condominium Association, Sec. I, Inc. Community. I hereby authorize the credit bureau and/or third party screening provider selected by the Sales & Lease Committee/Board of Directors of Colonial Club Condominium Association, Sec. I, Inc. and Seacrest Services, Inc. to verify, obtain, and submit such information including but not limited to consumer report (credit score), eviction, and criminal record search. I am aware/have been notified that the information obtained is to be used in the processing of my application. I hereby release and hold harmless the Credit Bureau, Applicant Information, Sales & Lease Committee/Board of Directors of Colonial Club Condominium Association, Sec. I, Inc., and Seacrest Services, Inc., its affiliates, employees, and agents and any other organization that provides information from any and all liabilities arising out of such use of the use of the information in connection with the background report/results.

Print Applicant Name	
Applicant's Signature	Date

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Print Applicant Name	
Applicant's Signature	 Date

RULES AND REGULATIONS ACKNOWLEDGEMENT

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Colonial Club Condominium Association, Sec. I, Inc. is a strictly residential community for persons fifty-five (55) years of age and older: occupancy in the absence of the fifty-five (55) year old unit owner(s) is limited to thirty (30) days per calendar year.

Occupancy of a guest in the absence of the unit owner(s)/approved tenant(s) must be reported to the Building Representative of the respective building.

Restrictions for parking and types of vehicles are detailed in the Documents. All residents, occupants, and guests must park head in and in their assigned/respective spaces.

Applications for permission for material alteration are available in the Clubhouse Office. Board approval is required for all material alterations and must be obtained prior to commencement of any work. Applications must be submitted by unit owner only.

Laundry and/or other articles may not be hung on railings/balconies.

Cover-ups must be worn to and from the pool.

Laundry Room Hours are from 8:30 AM to 8:30 PM. No smoking and no storage in the Laundry Room.

Storage Room: No material is allowed outside of the Storage Bins. Flammable material is strictly prohibited from being stored in the Storage Bins.

Walkways must be kept clean and clear for passage.

Rentals: All leases must be Board approved; a minimum lease of three (3) months and a maximum of one (1) full calendar year after one (1) full calendar year of ownership; sub-letting and/or renting of rooms is strictly prohibited/not allowed.

Front doors may not be left ajar (open); screen doors are not allowed.

Keys: The Association must have key(s) to access your unit for emergency purposes. Vehicle keys must also be made available for emergency purposes for unit owners absent for an extended time frame.

Unit owner(s)/approved tenant(s) who are absent from the Unit must ensure that a caretaker or the like visits the Unit and checks for Unit conditions at least weekly.

Water must be shut off and air conditioners left on when the unit owner is absent for a week or longer.

Signature of Lessee	 Date	
Signature of Lessee	 Date	

CLUBHOUSE RULES AND REGULATIONS ACKNOWLEDGEMENT

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The Clubhouse and Recreational Facilities are provided for the leisure and enjoyment of unit owners and lessees. It is expected that you give the same care you would your own home.

Privileges of the Clubhouse and Recreational Facilities are extended to guests of the unit owners and lessees contingent upon them respecting and adhering to the Rules & Regulations governing the areas.

Unit owners and lessees are fully responsible for the conduct/actions of their guests.

Billiard Room and Exercise Facilities: Use of these facilities is limited to persons sixteen (16) years of age and older at all times. Use of all equipment is at your own risk.

Use of the pool is at your own risk. There is no lifeguard at the pool; it is open daily from dawn to dusk (closed during inclement weather and/or lightening). The Association/Board reserves the right to extend or change the hours of use for special events and to deny admittance to any person not conforming to the Pool and Patio Rules and Regulations.

Food is not allowed in the pool area excluding Association/Community sponsored events.

NO SMOKING in the Clubhouse and/or within twenty-five (25) feet of the Recreation Area.

All persons must shower and wash off suntan oil/lotion prior to entering the pool. This is Florida State Law.

Diving or jumping into the pool and/or running in the pool area is not permitted.

Persons with skin, ear, eye or other infection including open wounds are prohibited from using the pool. Children in diapers must wear "swimmies" (protective plastic coverings) in the pool.

Children under sixteen (16) years of age MUST be accompanied by an adult unit owner/approved tenant when using the pool.

Entry and exit from the pool area: Use exterior gates only. Please do not enter or exit the pool area by walking through the Clubhouse.

Shoes must be worn at all times in the Clubhouse.

Please protect chairs and chaise lounges with towels when wet or using suntan oil/lotion. Also, chairs and/or chaise lounges may not be reserved or removed from the designated pool area.

Lessees are required to fully acquaint guests including children regarding all the rules governing the use of the pool and the Clubhouse.

	_
Signature of Lessee	Date
Signature of Lessee	Date

LESSEE INFORMATION SHEET

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BUILDING #	UNIT #	PARKING SPACE #	
NAME OF UNIT OWNER(S)		CONTACT NUMBER	
NAME OF LESSEE			
CONTACT NUMBER		CELL NUMBER	
EMAIL ADDRESS			
VEHICLE MAKE	MODEL	TAG NUMBER	
If you will be away for an extended period of one week or more, please leave a key for your vehicle on your kitchen counter. Key will be used for emergency only!			
DO YOU HAVE A SERVICE/EM	OTIONAL SUPPO	RT ANIMAL? YES NO_	
If yes, please complete the Reasonable Accommodation Service/Emotional Support Animal Registration Form (to be provided by the Association). The Service/Emotional Support animal must be approved by the Association prior to occupancy.			
EMERGENCY CONTACT NAME	<u> </u>		
CONTACT NUMBER			
NOTES/ADDITIONAL INFORM	ATION		

In connection with my application to rent, lease or purchase a unit at Colonial Club Condominium Association, Sec. I, Inc., I understand that consumer reports and/or in-

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vestigative consumer reports will be requested from a consumer reporting agency. These reports may include the following types of information: names and dates of current or previous landlords and employers, reasons for termination of residency or termination of employment as well as other sources of information. I further understand that such reports may contain public record information such as bankruptcy proceedings, judgements, criminal records, etc. from federal, state and other agencies that maintain such records. Other information obtained may relate to my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living.

I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY THE CONSUMER REPORTING AGENCY TO FURNISH THE ABOVE-MENTIONED INFORMATION.

I have the right to make a request to the consumer reporting agency Applicant Information ("AI"), formerly known as Renters Reference of Florida, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information and the recipients of any reports on me which the agency has previously furnished within the twelve month period preceding my request. I hereby consent to your obtaining the above information from the agency.

I hereby authorize procurement of consumer report(s) and investigative consumer report(s). If my application is accepted and I occupy a dwelling unit, this authorization shall remain on file and shall serve as ongoing authorization for you to procure such reports at any time during my residency on the property.

Califor	nia, Minnesota	ring my residency on a and Oklahoma consu by of any consumer re		_(check here)
Print Last Name, First Name, Middle Name Applicant's Signature		Social Security Number		
			Date of Birth (MM/DD/YYYY	
Current	Street Address	<u> </u>	Driver's License Number	D/L State
Condomi	inium Associat	ion, Sec. I, Inc., I unc	Contact Number ease or purchase a unit at Co lerstand that consumer report ted from a consumer reportin	ts and/or in-

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	nia, Minnesota and Oklahoma cons request a copy of any consumer r	•	_(check here)
Print Last Name, First Name, Middle Name Applicant's Signature Current Street Address		Social Security Number Date of Birth (MM/DD/YYYY	
		City	State Zip