

THE SANCTUARY PBG HOA, INC.
C/O Sea Breeze Community Management Services, Inc.
4227 Northlake Boulevard
Palm Beach Gardens, FL 33410
(561)626-0917 Fax (561)626-7143
www.seabreezecms.com

Tenant Application

(updated 6/2017)

COMPLETE ITEMS 1 TO 15 & SUBMIT NO LATER THAN 2 WEEKS PRIOR TO MOVE-IN DATE. Old application packages will not be accepted our most current application package is available online at the Sea Breeze website.

**MAIL OR DROP OFF APPLICATION PACKAGE AT OUR OFFICE.
FAX COPIES WILL NOT BE ACCEPTED AS APPLICATION IS INCOMPLETE.**

If copies needed a charge of 25 cents per page required

- _____ 1. Application for occupancy form (all information must be completed). (pg. 2-6)
- _____ 2. Addendum to lease to be completed by owner(s) and tenant(s). (pg.7)
- _____ 3. Pet registration form. (pg. 8)
- _____ 4. Each adult applicant (18 and over) renting or residing in unit to complete occupant certification. (pg. 9)
- _____ 5. Owner(s) complete owner certification. (pg. 10)
- _____ 6. Residential screening request & disclosure & authorization agreement to be completed by all ADULTS (18 and over) renting or residing in unit. (pg. 11-12)
- _____ 7. Each adult to sign the certificate of approval. (pg. 13)
- _____ 8. Each applicant must sign acknowledgement of the rules and regulations (pg. 14 - 18)
- _____ 9. Provide a copy of the signed lease contract naming the owners, tenants and start & end date of term.
- _____ 10. Provide a copy of registration and proof of insurance for each vehicle.
- _____ 11. Provide a copy of picture ID (driver's license or passport) for each adult (18 and over) renting or residing in unit.
- _____ 12. \$100.00 **CASH, MONEY ORDER OR CASHIER'S CHECK ONLY** per adult (18 and older) representing a non-refundable application processing fee made payable to The Sanctuary HOA, Inc.
- _____ 13. Out of the country applicants are subject to completing additional paperwork and fees as determined by our screening company. Please contact our office prior to submitting the application to obtain additional paperwork and fee amount. If additional fees are needed this is non-refundable and made payable to The Sanctuary HOA., Inc. **CASH, MONEY ORDER OR CASHIER'S CHECK ONLY will be accepted.**
- _____ 14. \$50.00 **CASH, MONEY ORDER OR CASHIER'S CHECK ONLY** representing a non-refundable administrative fee made payable to Sea Breeze CMS, Inc.
- _____ 15. If the application is not completed in its entirety, the application will be RETURNED and WILL NOT be approved. Interview is required prior to approval. It is critical for the interview that occupant(s) speak and read English or you must bring an interpreter with you.

Application Criteria

An applicant may not be approved based on one or more of the following:

1. Application not completed in full.
2. False information provided in application.
3. Background report.
4. A boat, trailer, motorbike, recreational vehicles or commercial vehicle is parked at the property, unless stored in the enclosed garage.
5. Excluding caged birds or those in a terrarium or aquarium, are not to exceed three (3) per unit.
6. Minimum lease term six (6) months, maximum lease term one (1) year. No unit may be rented more than two (2) times per year starting with the beginning date of the prior lease.

Current Information

(All information must be printed and legible throughout the documents).

Sanctuary Address: _____

Name of Current Owner: _____

Current Owner Phone Number: _____ Email Address: _____

Name of Tenant(s): _____

Tenant(s) Phone Number: _____ Email Address: _____

Lease Term: Start _____ End _____

Realtor Name & Phone Number: _____

APPLICATION FOR OCCUPANCY

OCCUPANT(S) INFORMATION:

Information regarding each person to reside in the unit (including children). (Use a separate sheet of paper for information regarding all additional residents, as needed.)

Name [Print-must be legible.]	Age	Relationship to Tenant
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

LICENSED DRIVERS: To be residing in the community

Name: _____ License # _____ State: _____

Name: _____ License # _____ State: _____

Name: _____ License # _____ State: _____

Name: _____ License # _____ State: _____

Others: _____

VEHICLES: Provide a copy of registration and proof of insurance for each vehicle.

Make & Model of Vehicle	License Number	Color	State Registered

EMERGENCY CONTACTS:

1) In case of Emergency notify: _____ Relationship: _____

Address: _____ Phone: _____

PERSONAL REFERENCES: (DO NOT LIST RELATIVES. Each adult (18 and over) occupant must have 3 references.

1) Tenant Name: _____ Relationship: _____

Name of Personal Reference: _____ Phone: _____

Address: _____

2) Tenant Name: _____ Relationship: _____

Name of Personal Reference: _____ Phone: _____

Address: _____

3) Tenant Name: _____ Relationship: _____

Name of Personal Reference: _____ Phone: _____

Address: _____

1) Tenant Name: _____ Relationship: _____

Name of Personal Reference: _____ Phone: _____

Address: _____

2) Tenant Name: _____ Relationship: _____

Name of Personal Reference: _____ Phone: _____

Address: _____

3) Tenant Name: _____ Relationship: _____

Name of Personal Reference: _____ Phone: _____

Address: _____

CURRENT RESIDENCE: Provide current residence for each adult (18 and over) occupying the unit. Use separate sheet of paper, if necessary.

1) Tenant Name: _____

Current Address: _____

I/We have _____ owned (give length of time) _____

I/We have _____ rented Start (mm/dd/yyyy): _____/_____/_____ End (mm/dd/yyyy): _____/_____/_____

Name of Landlord or Mortgage holder: _____

Address of Landlord or Mortgage holder: _____

Phone Number of Landlord or Mortgage holder: _____

CURRENT RESIDENCE CONTINUED:

2) Tenant Name: _____

Current Address: _____

I/We have _____ owned (give length of time) _____

I/We have _____ rented Start (mm/dd/yyyy): _____/_____/_____ End (mm/dd/yyyy): _____/_____/_____

Name of Landlord or Mortgage holder: _____

Address of Landlord or Mortgage holder: _____

Phone Number of Landlord or Mortgage holder: _____

RESIDENCE HISTORY: Provide previous residence history for each adult (18 and over) occupying the unit. **If less than 5 years, provide residence history on a separate sheet, if necessary.**

1) Tenant Name: _____

Previous Address: _____

I/We have _____ owned (give length of time) _____

I/We have _____ rented Start (mm/dd/yyyy): _____/_____/_____ End (mm/dd/yyyy): _____/_____/_____

Name of Landlord or Mortgage holder: _____

Address of Landlord or Mortgage holder: _____

Phone Number of Landlord or Mortgage holder: _____

2) Tenant Name: _____

Previous Address: _____

I/We have _____ owned (give length of time) _____

I/We have _____ rented Start (mm/dd/yyyy): _____/_____/_____ End (mm/dd/yyyy): _____/_____/_____

Name of Landlord or Mortgage holder: _____

Address of Landlord or Mortgage holder: _____

Phone Number of Landlord or Mortgage holder: _____

WORK HISTORY: Provide work history on all adult (18 and over) occupants, use separate page if necessary. If less than 5 years, provide previous employer info on separate page.

1) Tenant Name: _____

2) Tenant Name: _____

Employer _____

Employer _____

Phone _____

Phone _____

Address _____

Address _____

Position _____

Position _____

Supervisors Name _____

Supervisors Name _____

Employed From _____ To _____

Employed From _____ To _____

Reason for Leaving _____

Reason for Leaving _____

I give authorization to The Sanctuary HOA Inc. or its agents to contact any and all references listed.

Signature

Signature

Printed Name

Printed Name

Date

Date

CRIMINAL BACKGROUND:

I understand a Nationwide Law Enforcement Investigation is required and will be done.

1) Have you (or any other occupants) ever been convicted of a State or Federal offense:

_____ Yes _____ No If yes provide detail: _____

2) Are you (or any other occupants) presently awaiting trial on any criminal offense?

_____ Yes _____ No If yes provide detail: _____

If yes to any of the above, give occupants name, dates, name of court, and details of conviction (use separate sheet of paper, if necessary).

ADDENDUM TO LEASE

Fill in the blanks. Both landlord(s) and tenant(s) must print name and sign. A witness to both the landlord(s) and tenant(s) signature is required, witness must print name and sign.

THIS ADDENDUM is made between _____ (“Landlord”) and _____ (“Tenant(s)”) effective this _____ day _____ 20____ and is intended to and shall supplement, amend and modify that certain Lease dated _____ regarding Unit _____, in the following respects:

1. Tenant(s) are subject to and shall abide by all covenants and restrictions and rules and regulations set forth in the Declaration of Covenants, Conditions and Restrictions for Sanctuary HOA Inc. If the tenant(s) fails to comply with the rules and regulations the association has the right to evict the tenant(s).

2. In the event the landlord/owner becomes delinquent in payment of assessments (regular or special) or other charges to the Association, the Association may notify the tenant. Upon such notification the tenant shall be obligated to pay the rent required under the lease to the Association, until all delinquent assessments and other charges have been paid in full. During the period of time the tenant is paying the rent to the Association, the Landlord shall not seek to evict the tenant for non-payment of rent.

Witness:

LANDLORD(S)

Signature

Signature

Printed Name

Printed Name

Signature

Signature

Printed Name

Printed Name

Witness:

TENANTS(S)

Signature

Signature

Printed Name

Printed Name

Signature

Signature

Printed Name

Printed Name

Pet Registration Form

Fill in the blanks. Submit a recent picture of each pet. Sign and date acknowledgement.

Unit Owner or Resident _____

Unit # _____ Address _____ Phone # _____

Type of pets; (Please circle) Dog Cat Bird Other (specify) _____

Veterinarian's Name _____ Veterinarian's Phone # _____

1) Pet Name _____ Pet Age _____ Pet Current Weight _____

Pet license/ Tag Number _____ Pets Estimated Maximum Weight at Maturity _____

Breed: _____

Please attach recent photo of pet here



Please list pet's rabies shot record below

2) Pet Name _____ Pet Age _____ Pet Current Weight _____

Pet license/ Tag Number _____ Pets Estimated Maximum Weight at Maturity _____

Breed: _____

Please attach recent photo of pet here



Please list pet's rabies shot record below

I am aware of the associations rules, regulations and restrictions regarding pets on property and agree to abide by them.

Unit/ Pet owner's Signature _____ Date _____

PLEASE RETURN COMPLETED FORM WITH PHOTO(S) TO THE OFFICE

OCCUPANT CERTIFICATION

Each adult (18 and over) renting or residing in unit to print name, sign and date.

By my signature below, I *hereby* certify

- 1) That all of the information contained in this application is true and complete and I/we give my/our permission for a nationwide law enforcement background investigation and credit history verification.
- 2) 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 reside on this property.
- 3) That the unit I/We occupy may not be leased or sub-leased without the express written approval of The Sanctuary HOA, Inc.
- 4) 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 and a background investigation done at the occupant's expense prior to occupancy.

Print Name of Occupant 1

Signature of Occupant 1

Print Name of Occupant 2

Signature of Occupant 2

Print Name of Occupant 3

Signature of Occupant 3

Print Name of Occupant 4

Signature of Occupant 4

Date Signed _____

OWNER CERTIFICATION

Owner to sign and date. A witness to the owners(s) signature is required, witness must sign and date.

By my signature below I/We hereby certify:

- 1) That the information contained in this application is true and accurate to the best of my knowledge.
- 2) That a copy of the lease agreement or sales contract is attached, and that there are no other agreements concerning this lease, rental, or potential purchase.
- 3) That the unit owner is responsible for any and all costs related to damages to community property and/or violation of the Documents of The Sanctuary HOA, Inc. and that these costs include actual damage and all costs and fees paid for the associations attorney as may relate to the owners, tenants and/or the guests of such tenants.

I/we hereby authorize the Association to evict a tenant at my (unit owner) expense in any case where my tenant fails to abide by the Documents of The Sanctuary HOA, Inc.

I/We understand and agree to pay the fines issued by the Association Fining committee for violations of the Association’s Documents and The Sanctuary HOA, Inc. any and all remedies available by law to correct a violation of governing documents.

Signature of Owner: _____ Date _____

Signature of Co Owner: _____ Date _____

Signature of Witness: _____ Date _____

OFFICE USE ONLY:

Sale () Lease () Unit Address: _____

APPROVED () DENIED () DATE: _____

Board of Director’s Signature or Authorized Board Representative: _____

REASON DENIED: _____

LEASE DATES: Start _____ End _____ By _____

The Sanctuary / Ref# _____

RESIDENTIAL SCREENING REQUEST

First: _____ Middle: _____ Last: _____

Address: _____

City: _____ ST: _____ Zip: _____

SSN: _____ DOB (MM/DD/YYYY): _____

Tel#: _____ Cell#: _____

Current Employer

Company: _____ N/A _____ Tel#: _____ N/A _____

Supervisor: _____ N/A _____ Salary: _____ N/A _____

Employed From: _____ To: _____ Title: _____ N/A _____

Current Landlord

Company: _____ N/A _____ Tel#: _____ N/A _____

Landlord: _____ N/A _____ Rent: _____ N/A _____

Rented From: _____ N/A _____ To: _____ N/A _____

I have read and signed the Disclosure and Authorization Agreement.

SIGNATURE: _____ **DATE:** _____

DISCLOSURE AND AUTHORIZATION AGREEMENT
REGARDING CONSUMER REPORTS

DISCLOSURE

A consumer report and/or investigative consumer report including information concerning your character, employment history, general reputation, personal characteristics, criminal record, education, qualifications, motor vehicle record, mode of living, credit and/or indebtedness may be obtained in connection with your application for residence.

AUTHORIZATION

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other persons or agencies having knowledge about you to furnish AmeriCheckUSA with any and all background information in their possession regarding you, in order that your residence qualifications may be evaluated. You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

READ, ACKNOWLEDGED AND AUTHORIZED

Print Name

Signature

Date

For California, Minnesota or Oklahoma applicants only, if you would like to receive a copy of the report, if one is obtained, please check the box.

CERTIFICATE OF APPROVAL FOR LEASE

The undersigned authorized representative **THE SANCTUARY HOA Inc.** here by certifies that the proposed conveyance of the following unit has been approved as written below:

Unit Number: _____ Unit Address: _____

Owner(s): _____

Tenant(s): _____

The above Tenant(s) as evidenced by Tenant(s) signature(s) below hereby acknowledge receipt of the Rules and Regulations for association and agree and understand that condition of approval is adherence to all the community rules. Failure to abide by the rules and regulations for the association will result in non-renewal of lease approval and possible eviction from the unit.

Tenant(s) Printed Name

Tenant(s) Printed Name

Tenant(s) Signature

Tenant(s) Signature

Date

Date

This is to certify that the above named Tenant(s) have complied with the above statements and hereby obtain the approval of **The Sanctuary HOA Inc.**

By: _____ As: _____ Date: _____
On behalf of the Board of Directors

The Sanctuary PBG HOA Interview Reminders

Owners: are responsible for the behavior of their tenants, guests, contractors, vendors, etc. Owners will be held financially liable for any fees and costs incurred by the Sanctuary through the actions of the above.

Personal Items: Personal items (lawn equipment, garbage cans, etc.) must be stored out of view from road and neighbors. Garden hoses visible from the street must be neatly stored in a dispenser, or otherwise be shielded from view from the road by shrubbery.

Signs: No signage other than that placed or authorized by the Board permitted.

Solicitation: No door-to-door solicitation permitted. Placing of materials on resident doors or mailboxes is prohibited, unless authorized by the Board.

Clotheslines: No clotheslines are permitted that can be seen from the road or neighbors.

Changes/Modifications: No temporary structures permitted. Outdoor play equipment requires prior approval. All exterior modifications must be approved in writing by the association prior to any changes or modifications. Or owner may bear cost of restoration.

Holiday Lights: Exterior holiday decorations must be removed within THREE WEEKS from the end of the official holiday.

Noise: Residents shall take into consideration all noise levels of radios, televisions, musical instruments or any other items to ensure that the sound will not disturb others.

Lake:

1. No boat or water craft of any type permitted on lake except equipment used by the association.
2. No persons without the prior written approval of the board shall be permitted to use the lake for any purpose whatsoever. The Association shall not be held responsible for any loss, damage or injury to any person, animal or property arising out of authorized or unauthorized use of the lakes, ponds or any other bodies of water within the project by any owner, tenant, guest's invitees or licensees.

Approval of re-sale and rental:

- 1) **Sale** – Seller must notify the Sanctuary of intent to sell and provide copy of the sales contract stating the names of all of the Sellers and Buyers. Upon receipt, a certificate of approval of the sale will be issued after Buyer has completed application form and attended the Welcome Meeting.
- 2) **Rental** – Rental application forms are available to download from the website. Please read instructions as incomplete forms will be returned “unapproved”
 - a) No tenant may move in without receipt of the written Certificate of Approval
 - b) A non-related person who resides in the unit with or without the owner for a period of 30 days or more will be required to complete the rental application forms.
 - c) If owner is delinquent with their assessments the association has the right to collect assessment payment from the tenant.
 - d) ALL leases must be in writing. Minimum lease term six (6) months, maximum lease term one (1) year. No unit may be rented more than two (2) times per year starting with the beginning date of the prior lease.

Conservation Areas and Upland Preserve Areas:

1. Activities prohibited within these areas include, but are not limited to: construction or placing of buildings on or above the ground, dumping or placing of soil or other substances, including trash or other debris, removal or destruction of trees, shrubs or other vegetation, with the exception of exotic or nuisance vegetation which may be removed, and any other activities detrimental to the drainage, flood control, water conservation, erosion control, and/or wildlife, habitat conservation or preservation.

2. Residents may remove materials growing from preserve areas that are encroaching over their yards by cutting up the vertical property line. The offending plant must not be cut in such a way so as to cause it to deteriorate and/or die. Residents may NOT enter into any preserve area to add or remove any materials, including plants. The association shall employ the services of a professional company to maintain the preserve areas as necessary.

Lawns, Plants, Beds, Planting & Trees:

Lawns and plantings must be neatly maintained at all times.

Sod: Only St. Augustine sod is permitted in lawns.

Trees: Proper pruning of trees is required. Hat-racking of trees is prohibited.

All landscaping, fencing or other items in common areas are subject to cutback or removal by the HOA without notice to the owner should they become an eyesore or maintenance work must be completed.

The HOA will make every effort to contact the owner prior.

Hedges: All hedges are required to be maintained at no more than ten feet in height. Hedges between homes may be higher if both neighbors agree.

Lawn Equipment: Use of power lawn equipment is permitted during the hours of 8:00 a.m. to 8:00 p.m. Monday through Saturday and Noon to 8:00 p.m. on Sunday.

Commercial Lawn Services: No commercial lawn service is permitted to place any landscape waste at the street. Street pick up by the city is for homeowners use only. CITY CODE.

Fines: Sanctuary has the authorization to fine unit owners who violate the rules

Overnight Parking: No overnight parking on the road is permitted. Overnight is considered to be between the hours of 1:00 a.m. to 6:00 a.m. seven nights a week. Offending vehicles are subject to tow at vehicle owner expense without further notice to vehicle owner.

Vehicle Repairs Maintenance: Vehicles which cannot operate under their own power, or otherwise are not street legal, and which remain on the property for more than 72 hours, may be towed at the vehicle owner's expense. All vehicles must be street legal. No repairs of vehicles shall be made on the property. Drainage of any fluids into the common elements is prohibited. All vehicles must be kept in proper operating condition so as not to be a hazard or a nuisance by noise, exhaust emission, appearance or otherwise.

Commercial Vehicles: No commercial vehicles, boats, mobile homes, campers, trailers, etc., shall be permitted on the property overnight, unless stored in an enclosed garage.

Vehicle Sale Sign: For sale signs must be attached in the interior sides of the window of their vehicle.

Maximum of one 6" by 6" sign. NO other For Sale signs are permitted.

Oversized Vehicles: Oversized vehicles that cannot fit into a standard garage are not permitted overnight within the Sanctuary.

Pets: Permitted pets include dogs, cats, caged domesticated birds, hamsters, gerbils, guinea pigs, aquarium fish, small turtles, tortoises, domesticated rabbits, rats, mice, and creatures normally maintained in a terrarium or aquarium. All dogs and cats must be walked on a leash and be in full control by their owners at all times. You

must pick up after your pets. Pets shall not be left unattended outside of the unit. Commercial breeding of pets within the Association is prohibited.

Limitation of Pets: Excluding caged birds or those in a terrarium or aquarium, are not to exceed **three (3)** per unit. Board may request removal of excess animals. Written complaints from a unit owner and one other witness, addressed to the Board regarding nuisance pets, may result in the animal being removed from the Association.

Generators/Noise Level: Generators are permitted, provided they comply with governmental restrictions for noise levels, etc. Portable generators must be placed in the front of the house only. Permanent generators must be placed at the side of the house & shielded from view of road with shrubbery.

Gasoline containers may NOT be stored on the exterior of your property at any time.

Storm Shutters: From the first hurricane watch through the active hurricane season (generally August 15th through October 30th) shutters will be permitted to remain on the difficult to install and remove windows on the 2nd floor and above the front door. All others at the front of the house must be removed within seven days after the hurricane. At all times it is the unit owner's responsibility to allow for adequate ingress and egress due to the potential fire hazards if windows and doors are boarded up. All shutters must be approved by the ARC and conform to current codes. Plywood shutters are NOT permitted to remain up for any longer than 7 days after the hurricane. Homes vacant over the hurricane season may leave all their shutters in place (but not plywood) for the duration of the season provided written notice of same is provided to the management company.

Garbage Pick-up:

Type of Waste:

Pick-up Days:

Regular Pick-up

Tuesday & Friday

DO NOT PLACE TRASH OUT UNTIL AFTER 6:00 PM EVENING PRIOR & REMOVE CANS SAME DAY AS PICK UP

Recycling Material, Vegetation

Friday

Vegetation only may be placed at curbside after 12:00 noon time on Thursdays

To schedule bulk pick-up contact Waste Management at 561-547-4000

Important Numbers:

Seacoast Utilities	(561) 627-2920
Emergency After Business Hours	(561) 627-2929
Police (Non-Emergency)	(561) 799-4445
Florida Power & Light	(561) 697-8000
AT&T	(888) 333-6651
Comcast	(800) 934-6489
4 X1 boxes, high speed internet, all pay channels except sports & pay per view.	
ADT Security - Sales & Service	(800) 878-7806
- Monitoring Center	(800) 226-2351
(Monitoring also included in HOA Dues. Ask for certificate of insurance as you may save money on your insurance).	
Teco residents Gas	(877) 832-6747
Versatile Gas (Formally Beacon Gas)	(561) 845-9421
Waste Management	(772) 546-7700

Note:

Should you have any other questions or require help please feel free to contact our office, or you may contact the President of the association:

Name: Howard Rosenkranz

Address: 25 Princewood Lane

Phone Number: 561-723-1213

Email Address: sales@processsolutions.net

Gate System: When you have visitors they will dial your code from the entry gate, it will ring through to the telephone number that you have provided us with. If you wish to let your visitors in press number nine (9) on your telephone and then hang up. You can use any number, such as home, work or cell number.

The telephone number we will programmed into the system for you will be: _____

Email Address:

Please provide your email address and sign and date if you would like to receive emails related to association business including the quarterly gate access code or association related updates.

_____ Yes, please provide your email address: _____

_____ No

Signature

Date

I/We agree abide by the Declaration of Covenants, Articles of Incorporation, By-laws, rules and regulations and any Amendments there to.

Buyer/Renter/Resident Signature

Buyer/Renter/Resident Signature

Buyer/Renter/Resident Printed Name

Buyer/Renter/Resident Printed Name

Date

Date