

# SHUTTERS COA, 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](http://www.seabreezecms.com)

## Tenant Application

(last updated 2/2015)

**COMPLETE ITEMS 1 TO 14 & SUBMIT 14 BUSINESS DAYS 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 ONLY.**

**If copies needed a charge of 25 cents per page is required**

**If the application is incomplete, the application will be RETURNED and WILL NOT be approved.**

- \_\_\_\_\_ 1. Application for occupancy form (all information must be completed). (pg. 3-6)
- \_\_\_\_\_ 2. Addendum to lease to be completed by owner(s) and tenant(s). (pg.7)
- \_\_\_\_\_ 3. Each adult (18 and over) renting or residing in unit to complete occupant certification. (pg. 8)
- \_\_\_\_\_ 4. Owner(s) complete owner certification. (pg. 9)
- \_\_\_\_\_ 5. Residential screening request & disclosure & authorization agreement to be completed by all ADULTS (18 and over) renting or residing in unit. (pg. 10-11)
- \_\_\_\_\_ 6. Certificate of Approval to be completed by each adult (18 and over). Fill in the blanks where the paper request for the property address, owner's name, tenant's name, tenant's signature and date. This paperwork is required for approval. The approval is not authorized until the bottom section of the page is completed by an authorized Board Member or Property Manager. (pg. 12)
- \_\_\_\_\_ 7. All adults (18 and over) review the rules and regulations. Initial, sign and print your name at the bottom. These rules will be reviewed as well during the welcome meeting. (pg. 13)
- \_\_\_\_\_ 8. Provide a copy of the signed lease contract naming the owners, tenants and start & end date of term.
- \_\_\_\_\_ 9. Provide a copy of vehicle registration, proof of insurance.
- \_\_\_\_\_ 10. Provide a copy of picture ID (driver's license or passport) for each adult (18 and over) renting or residing in unit.
- \_\_\_\_\_ 11. \$100.00 **CASH, MONEY ORDER OR CASHIER'S CHECK ONLY** per adult (18 and older), or married couple representing a non-refundable application fee made payable to Shutters COA, Inc.
- \_\_\_\_\_ 12. \$500.00 **CASH, MONEY ORDER OR CASHIER'S CHECK ONLY** representing a move-in/move-out deposit per adult (18 and older), or married couple. Refundable upon completion of walk through. Made payable to Shutters COA, 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 Shutters COA, Inc. **CASH, MONEY ORDER OR CASHIER'S CHECK ONLY will be accepted.**
- \_\_\_\_\_ 14. Application completely filled out, if not, application will be returned unapproved. Interview is required prior to approval. It is critical for the interview that applicant(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. Credit report.
5. Sub-leasing of the property.
6. Ownership established less than one (1) year.
7. Lease term is established for less than six (6) months.
8. Leasing unit more than once (1) in a twelve (12) month period.
9. A boat, trailer, motorbike, recreational vehicles or commercial vehicle is parked at the property.
10. Pet residing at the property.

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

Shutters Property Address \_\_\_\_\_

Name of Current Owner: \_\_\_\_\_

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:**

Make & Model of Vehicle	License Number	Color	State Registered

**EMERGENCY CONTACTS:**

1) In case of Emergency notify: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

2) In case of Emergency notify: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**PERSONAL REFERENCES: (DO NOT LIST RELATIVES).** Each adult (18 and over) occupant must have 2 references if they cannot provide 2 prior landlords.

1) Tenant Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name of Personal Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

2) Tenant Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name of Personal Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

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**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: \_\_\_\_\_

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: \_\_\_\_\_

Employer \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

Position \_\_\_\_\_

Supervisors Name \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

2) Tenant Name: \_\_\_\_\_

Employer \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

Position \_\_\_\_\_

Supervisors Name \_\_\_\_\_

Employed From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

**I give authorization to Shutters COA 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 Shutters COA 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

## 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 Shutters COA, 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 Shutters COA, Inc and that these costs include actual damage and all costs and fees paid for the association's 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 Shutters COA, Inc.

I/We understand and agree to pay the fines issued by the Association Fining committee for violations of the Association's Documents and Shutters COA, 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 \_\_\_\_\_

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**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 \_\_\_\_\_

Shutters/ 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.

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**CERTIFICATE OF APPROVAL FOR LEASE**

The undersigned authorized representative **Shutters COA, Inc.** hereby 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 Shutters COA Inc.

By: \_\_\_\_\_ As: \_\_\_\_\_ Date: \_\_\_\_\_

Signed on Behalf of the Board of Directors

As stated in the Association documents the owner has provided me with a copy of the document set for Shutters COA , Inc. I agree to abide by the document set. By signing below I agree to this statement.

Tenant(s) Printed Name: \_\_\_\_\_

Tenant(s) Signature: \_\_\_\_\_

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

**Emergency Contact:**

If for any reason there is an emergency on your property please provide the best number that we can call.

\_\_\_\_\_

Contact Name

\_\_\_\_\_

Relationship to Property

\_\_\_\_\_

Contact Number

Property Address: \_\_\_\_\_

**Signature of Buyer/Renter acknowledged understanding and agreement to comply with the above rules for Shutters COA, Inc.**

\_\_\_\_\_

Buyer/Renter Signature

\_\_\_\_\_

Buyer/Renter Signature

\_\_\_\_\_

Buyer/Renter Printed Name

\_\_\_\_\_

Buyer/Renter Printed Name

# **The Shutters Condominium Association**

**April 1, 2002**

## **Revised House Rules and Regulations for the Owners, Guests and Visitors to the Shutters Condominium**

**The following revised House Rules and Regulations  
supersede all previous published as of April 01,  
2002 and approved by the entire Board of  
Directors on 03/12/02.**

**It is solely the OWNERS' responsibility to inform all Guests, Visitors, and Contractors of all the rules and regulations that pertain to them. Failure to do so will result in the Owners themselves being held financially responsible.**

# **Revised House Rules and Regulations – 04/01/02**

## **A. Common Elements**

1. Walkways and stairwells must be kept free of all obstructions at all times.
2. Laundry may not be hung from the front railings of the building, or on your outside patio at any time. This is to keep our property clean and uniform at all times as stated in the Condominium Documents
3. In owners' absence during hurricane season, patio furniture and all other objects must be brought inside unless the storm shutters are securely locked down.
4. Do not shake any matter (rugs, mats, mops and anything of a similar nature) over the banisters.

## **B. Parking**

1. Owners are to use only parking areas assigned to them.
2. Every owner is assigned 1 (one) parking space per unit in the main parking area. If you have a second automobile you must park it on the West Side of the building (facing the Texaco Gas Station). These parking areas will not be assigned and are on a first come, first serve basis. If there are no parking spaces available, you must park behind Baers Furniture Store or across the street in the Roadhouse parking lot at your own risk. If you use the guest parking spaces in the main parking area you will be towed.
3. Owners should inform all visitors where guest parking is allowed and a guest parking decal must be displayed inside the windshield at all times. Two (2) Guest passes will be distributed to each owner. If your guest is going to stay overnight, they must display this decal on the dashboard or their vehicle may be towed.
4. Owners are not allowed to park in any other owner's space for any reason. If you would like to park in another owner's space while he is away, you must first receive written permission from that owner, or once again you will be towed.
5. All boats, campers, trailers, motorcycles, trucks or commercial vehicles are prohibited in the main parking area. Special considerations from the Board of Directors can be made per the owner's request in writing for the owners only. (handicapped, injured, vandalism etc.). It is up to the owners to inform their guest of this rule.
6. Car washing is permitted only on the West End of the building. No washing or working on your automobile is permitted in front of the building at any time.
7. No one is allowed to part in the Car Wash area from 8:00AM to 8:00PM for any reason other than to wash their vehicle.

## **C. Outside Face of Building**

1. Personal notices are not permitted on any part of the building with the exception of the bulletin board on the first floor.
2. No ornaments of any kind are allowed on the outside of your windows or doors, with the exception of holiday decorations. Entrance doors and windows to your units can not be altered or changed in any manner.

## **D. Trash Deposal**

1. All trash or garbage must be securely wrapped and bagged before depositing in garbage container. Make certain chute is firmly closed. All boxes must be cut up and deposited in the garbage room where designated. All large appliances and furniture must be put out to the street on Monday or Wednesday for pick up on the next day. Littering on the property is prohibited. Garbage pickups are Monday, Wednesday and Friday at 8:00AM. During holidays there is no garbage pickup and the Board of Directors may request that you hold back on your garbage. Paint and painting supplies are not permitted in the garbage. Fluorescent lights and fixtures are also not permitted in the garbage room.

### **E. Obligation of Unit Owners.**

1. It shall be the obligation of all owners to live up to the House Rules as provided in the by-laws under the rules and regulation Exhibit "I" and declaration Article XII. It is also the owners' obligation to inform all of their guests, visitors, and contractors of House Rules and Regulations.
2. Unit owners will be held responsible for any acts, behavior or damage caused by guests and/or contractor to any common elements.

### **F. General**

1. The Association must have a key to all apartments at all times. This key would only be used in an emergency situation. Owners will be held responsible for damage caused to other units due to negligence if no key is available.
2. Unit owners shall not make or permit any disturbing noises in the building and/or grounds by themselves, families or guests. This includes people, barking dogs, the playing of instruments, or having your electronic devices on too loud. It is suggested that you close all your doors and windows if you are the cause of any of the above problems.
3. Domestic pets weighing no more than 30 pounds are permitted to owners only if they are approved by the Board of Directors in advance. All dogs or cats must be leashed at all times on any part of the Condominium property. All animal feces must be picked up and bagged prior to being thrown in our garbage. (Village Ordinance) Dogs should not be left unattended for any reason. (This includes being left on the walkways).
4. Units that are rented or loaned may not have pets. Visitors are not allowed to bring pets for overnight stays.
5. Basement recreation room may be used for private parties, meetings or for a social group by arrangements with the Board. Fee: \$25.00.
6. Bicycles may be parked in basement in an orderly fashion.
7. Owners may use the bulletin board for special notices. Owners may submit constructive suggestions and/or complaints in the suggestion box. These suggestions or complaints must include the owners' name and unit number for any consideration by the Board.
8. An application for the rental or sale of any unit by the owner must be approved by the Board prior to the sale or rental. (see page 30 Declaration). The Board may take up to 14 working days to approve such a request.
9. Any absent owner having House Guests must submit a letter to the Board of Directors prior to guest arrival, giving permission and stating the names, dates, and total number of guests expected. This information will be posted on the bulletin board. Please see rules and regulations pertaining to guests.

### **G. Hazards**

1. Fire: No open fires may be used on the patios. (City Ordinance)
2. Water: Any owner who plans to be absent for a period of three (3) days or more must turn off their water. Leaks and overflows could result in substantial damage that an owner could be held financially responsible for.
3. Damage: Owners will be responsible for paying for any damage that is caused by themselves, their guests, visitors and contractors.
4. Move In/Move Out Deposit: A \$100.00 (one hundred dollar) deposit is now required from both the owner and the prospective buyer as a move in/move out deposit. This money will be returned after a walk through by no less than two (2) members of the Board of Directors within 7 days of the final inspection. Any damages caused by either party will be deducted from their deposit.
5. Contractors: It is the owner's responsibility to advise all contractors, carpet installers, painters, tile setters, plumbers, etc. that they will have to haul out their own garbage. They are not allowed to use our dumpster, and



they have to clean up after themselves. Also, if the elevator is used, please be sure that it is left clean, and parking lot is left clean from all residue. Failure to comply with this rule will result in a charge to the owner to repair any damage caused.

#### **H. Pool Rules**

1. The pool is for use of Owners, Lessees and guests only.
2. The life preserver is for emergency use only.
3. Showers must be taken prior to entering the pool.
4. All lounge chairs and chairs must be fully towel covered.
5. No pets are allowed in the pool area.
6. Before leaving the pool area, be sure to close umbrellas and replace the pool furniture the way you found it.
7. All children under the age of 12 years of age must be supervised by an owner, parent or guardian at all times.
8. Babies under the age 2, or in diapers are not permitted in the pool.
9. No glassware or bottles permitted poolside.
10. Florida State Health Rules, which are posted in the pool area, are part of our House Rules.
11. During owner's absence, houseguests may not invite other guests to the pool.

#### **ADDENDUM**

##### **Rules and regulations pertaining to sale of apartments (see declaration, article XII page 29-30)**

1. If an owner is contemplating the sale of his apartment, he must submit an application to the Board of Directors so stating, giving name, address, and apartment number of prospective client within 14 working days of interview date.
2. The Seller makes an appointment with the Board of Directors submitting a copy of the proposed offer to purchase. This is prepared by the loan bank (if any) or the Realtor.
3. A date is set for the Board to meet with the client and the seller. Before or by this time, the client must submit two letters of reference. A fee of \$50.00 must accompany the application. This is non-refundable payment. An additional check in the amount as a move in-move out deposit of \$100.00 is due from both the buyer and the seller at the time of interview. This amount is refundable after a walk through inspection by two members of the Board after the move is completed.
4. The Board may approve or disapprove the contract within 30 days.
5. "The Shutters Association" has the option to first right to purchase.
6. If sale is approved, the Board is to give Seller a letter of approval verified by the Shutters Seal and notarized by a Notary Public and signed by two witnesses.
7. Upon purchase of an apartment, an owner may not lease that apartment for the first year from the date of purchase.
8. An apartment may not be rented more than once a year.
9. A default in payment of maintenance after the final due date is subject to a charge of \$5.00 per day. No partial payments will be accepted. Final due dates for maintenance are as follows: January 1<sup>st</sup>, April 1<sup>st</sup>, July 1<sup>st</sup>, October 1<sup>st</sup> of each year.