Embassy Park Condominium Association Inc

c/o Sea Breeze Community Management Services, Inc. 4227 Northlake Boulevard Palm Beach Gardens, FL. 33410 Phone: (561) 626-0917 Fax: (561) 626-7143

www.seabreezecms.com

Sales /Lease Application

(updated 9/2018)

Information is required on all applicants. <u>COMPLETE ITEMS 1 TO 9 & SUBMIT AT LEAST 15</u> <u>DAYS PRIOR TO CLOSING/LEASE START DATE.</u> Old application packages will not be accepted, our most current application package is available online at the Sea Breeze website.

MAIL OR DROP OFF THIS 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.	Fill in the section of the application package. (pg. 2-4)
2.	Each applicant to sign the certificate of approval. We need the original Certificate of Approval as it is needed for closing or lease. (pg. 5)
3.	BUYERS ONLY: Complete Pet Registration Form for Owners. (pg. 6)
4.	Complete Acknowledgement of Receipt of Rules and Regulations of the Association. (pg. 7)
5.	Submit a Credit and Criminal Background Report for all Buyers or Tenants and all occupants 18 years of age and older.
6.	Provide a copy of the executed Sales Contract or Lease Agreement.
7.	Provide a copy of the vehicle registration. If the vehicle registration is not in your name, provide a note to explain the situation.
8.	Provide a picture ID for each adult (18 and over) resident (legible copy of driver's license or passport).
9.	Submit \$50.00 per application for a non-refundable administrative fee payable to Sea Breeze CMS , Inc. CASH, MONEY ORDER OR CASHIERS CHECK ONLY .

No persons other than those listed on this Application will reside in the Unit and Applicant(s) and Owner(s) agree that anyone moving into the Unit at a later date will be required to submit an Application to the Association.

Application must be completely filled out, or it will be RETURNED for the missing information. <u>An in-person Interview only is required prior to approval</u>. <u>It is critical for the interview that occupant(s) speak and read English or you must bring an interpreter with you.</u>

Application Criteria

- 1. No pets permitted for leased properties.
- 2. Owners are permitted one (1) pet per home.
- 3. No trucks, motorcycles, recreational commercial vehicles, only passenger vehicles.
- 4. Vehicle is no longer than 220 inches with maximum height of 75 inches.
- 5. Each home is permitted only 2 spaces.

Email Address:

- 6. Lease Only: No lease may be made for less than three months.
- 7. No more than three leases per a twelve-month consecutive period is permitted.

Please provide your email address and sign and Association business updates.	date if you would like to receive emails related to
Yes, please provide your email address:	
No	
Signature	Date
I/We agree to abide by the Declaration of Covenaregulations and any Amendments there to.	ants, Articles of Incorporation, By-laws, rules and
Applicants Signature	Applicants Signature
Applicants Printed Name	Applicants Printed Name

CURRENT INFORMATION
(All information must be printed and readable)

The Unit Address:			
Name of Current Owner	& Phone Number:		
Name of Applicant(s): _			
Applicant(s) Phone Num	ıber:		
Applicant(s) Email Addı	ress		
Closing Date:	Leas	se Start Date	End Date
Realtor Phone Number &	& Name:		
<u> </u>	sted for or convicted of	a felony? Yes No landlord? Yes No	
Present Employer:		City & Street:	Phone:
Position:	Dates Employed:	to	Income:
Previous Employer:		_ City & Street:	Phone:
Position:	Dates Employed:	to	Income:
Have you ever left owing	sted for or convicted of g money to an owner or	a felony? Yes No landlord? Yes No	
			Income:
			Phone:
Position:	Dates Employed:	to	Income:
•	sted for or convicted of	a felony? Yes No landlord? Yes No	
Present Employer:		City & Street:	Phone:
Position:	Dates Employed:	to	Income:
Previous Employer:		_ City & Street:	Phone:
Position:	Dates Employed:	to	Income:

APPLICATION FOR OCCUPANCY

Information regarding each person to live in the unit. (including children)

Name [Print-must be readable]	Ag	e	Relationship to Applicant		
1					
2					
3					
4					
LICENSED DRIVERS: To be re	esiding in the community	y			
Name:	License #			State:	
Name:	License #			State:	
<u>VEHICLES</u> : NO TRUCKS PER	RMITTED				
Make & Model of Vehicle	License Number	Color	,	State Registered	_
EMERGENCY CONTACTS: In case of Emergency notify:		Relationsh	nin:		
Address:			_		
Authorization of Release of Informa application for rental are true and co residential history (rental or mortgag must be signed before it can be proc herein may constitute grounds for re	emplete, and hereby authorize, ge), employment history, cri essed by management. App	es verification of minal history reco	any and all ords, court r	information relating to records. This application	n
Applicants Signature	D	ate		_	
Applicants Signature	D	ate		_	
Applicants Signature	D	late			

EMBASSY PARK COA. INC.

Sea Breeze CMS, Inc. 4227 Northlake Boulevard Palm Beach Gardens, Florida 33410 561-626-0917 Fax 561-626-7143

www.seabreezecms.com

CERTIFICATE OF APPROVAL

The undersigned authorized representative of **EMBASSY PARK COA, INC.** here by certifies that the proposed conveyance of the following unit has been approved as written below: Unit Number: _____Unit Address: _____ Owner(s): Applicant(s): The above Buyer(s)/Renter as evidenced by Buyer(s) /Renter signature(s) below hereby acknowledge receipt of the Declaration of Covenants, Articles of Incorporation, By-Laws, Rules and Regulations and any Amendments to the Documents for the Association and agrees to be bound by said Documents. Upon closing of the unit, Buyer(s) understands that it is the responsibility of the Buyer(s) to furnish the Association with a recorded copy of the deed of conveyance indicating the Buyer(s) mailing address for all future assessments and correspondence from the Association. Applicant(s) Printed Name Applicant(s) Printed Name Applicant(s) Signature Applicant(s) Signature Date Date This is to certify that the above-named Applicant(s) have complied with the above statements and

thereby obtained the approval EMBASSY PARK COA, INC.

On behalf of the Board of Directors

Pet Registration Form for Owners

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 # Pet Name _____ Pet Age___ Pet Current Weight_____ Pet license/ Tag Number____ Pets Estimated Maximum Weight at Maturity_____ Please attach recent Please list pet's rabies shot record below photo of pet here I am aware of the Association's Rules, Regulations and Restrictions regarding pets on property and agree to abide by them. Unit/ Pet owner's Signature______ Date_____

City of West Palm Beach Dumpster Rules

Trash is picked up by the City of West Palm Beach twice a week: On Tuesday and Friday.			
FYI, here are the rules regarding that pickup:			
-The container must not be loaded past lid closing capacity and it must not be packed so tightly that it will not tumble easily out of the container			
-Nothing can be put into the container that will prevent other items inside from falling out.			
-Building materials – large pieces of wood, plaster, concrete, mattresses, furniture, tires of any kind, pallets, drums, and other bulky items must NOT be put into the container.			
-Hazardous waste must not be placed inside dumpster containers.			
-Dead animals must not be placed inside dumpster containers.			
-Commercial refuse must be drained of all liquids before being placed for collection.			
-ALL wet garbage, food materials, and sawdust must be placed in a securely tied plastic bag before being placed inside the container to prevent unsanitary conditions and avoid strewn or blown around refuse. It is the customer's responsibility to keep the inside of the dumpster free of spilled liquids and garbage.			
-Additional material placed beside the container will be left if there is no one at the service location to reload the container for an extra collection at that time.			
For a complete guide to figure out what waste is allowed and what is hazardous see link below			
$\underline{http://wpb.org/Departments/Engineering-Public-Works/Sanitation/A-Z-on-Waste-Disposal-Recycling}$			
Initial			
Initial			

Initial _____

ARE YOU RENTING YOUR PROPERTY?

Did you know that all rental properties in the City of West Palm Beach require a rental tax receipt?

Let the Development Services Team help you get your rental tax receipt and avoid possible penalties and code violations.

No need to worry.... It's easy!

Go online to find the application and fee schedule at www.wpb.org/Departments/Development-Services/Forms/Rental-Tax-Forms

You can mail your application in or visit us at City Hall located at:
401 Clematis Street 1st Floor
Questions call: 561-805-6700 or

Email: DS@WPB.org