

Cocoplum Property Owners Association of Palm Beach, 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

Purchase/Lease Application

(Updated 11/2019)

- The Association requires an orientation meeting to discuss the rules and regulations of the Community. This meeting will take place over the phone and email with Sea Breeze Community Management Services, Inc.
- Failure to comply may result in your application being declined.
- Failure to comply with the Rules and Regulations of the Community may result in the termination of the lease and/or non-renewal of the lease.
- Please do not staple application together.

Applications must be received at least 10 business days prior to your closing date or move in date.

All prospective purchasers/tenants must complete the Association's application and must submit the following documents:

- _____ 1) Complete Association application (all information must be completed). (pgs. 3-7)
- _____ 2) Residential Screening Request & Disclosure & Authorization Agreement to be completed by all adults. **Extra copies may be needed if more than one adult.** (pgs. 8 & 9)
- _____ 3) Provide a clear copy of the fully executed sales contract or lease agreement.
- _____ 4) Provide a clear copy of the vehicle registration for each vehicle.
- _____ 5) Provide a clear color photo of each vehicle.
- _____ 6) Provide a clear color photo of each pet.
- _____ 7) 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 **Sea Breeze CMS, Inc. MONEY ORDER OR CASHIER'S CHECK ONLY.**
- _____ 8) \$150.00 **MONEY ORDER OR CASHIER'S CHECK ONLY** per adult representing a non-refundable application fee made payable to **Sea Breeze CMS, Inc.**
- _____ 9) LEASE ONLY: \$500.00 **MONEY ORDER OR CASHIER'S CHECK ONLY** for lease deposit payable from the homeowner to **Cocoplum Property Owners Association of Palm Beach, Inc.**
- _____ 10) LEASE ONLY: Each tenant must provide three (3) letters of references (no family members).
- _____ 11) LEASE ONLY: Each tenant to provide one month's proof of income with pay stubs or if retired with pension stubs. If self-employed, please submit your most recent tax return. The rent amount may not exceed 30% of their annual gross income

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 the occupant(s) speak and read English or you must bring an interpreter with you.**

WARNING: We are not authorized to change an owner's name in our system until we have received a warranty deed or a copy of change from the Palm Beach Property Appraiser's website. If the purchaser does not provide this proof of change of ownership bills will go to the previous owner and the purchaser may incur late fees, interest, and attorney fees. **You** are responsible for providing the Association with the warranty deed.

You can drop off the deed at the guardhouse or provide to the Sea Breeze office, see header at the top of the page.

Application Criteria

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

1. Application is not completed in full.
2. Background report.
3. False information provided in application.
4. Under no circumstances may more than (1) one family reside in a unit at one time. As used herein, "family" or words of similar import shall be deemed to include a spouse, children, parents, brothers, sisters, grandchildren and other persons permanently cohabiting the unit as or together with the owner or permitted occupant thereof.
5. In no event shall occupancy (except for temporary occupancy by guests) exceed two (2) persons per bedroom and one (1) person per den (as defined by the Association for the purpose of excluding from such definition living rooms, dining rooms, family rooms, country kitchens and the like).
6. Prohibited vehicles are only permitted if stored within the enclosed garage, which are as follows:
A) a vehicle without a current license plate tag displayed, B) a vehicle that cannot operate under its own power, C) trucks, D) commercial vehicles, E) recreational vehicles, F) boats, G) trailers, H) campers.
7. Leasing: Letters of references.
8. Leasing: Leases must be in writing.

Note:

A person occupying a unit for more than one (1) month shall not be deemed a guest but, rather, shall be deemed a lessee for purposes of this Declaration (regardless of whether a lease exists or rent is paid) and shall be subject to the provisions of this Declaration, which apply to leases and lessees.

BE ADVISED A CRIMINAL BACKGROUND CHECK WILL BE CARRIED OUT ON ALL APPLICANTS OVER THE AGE OF 18. A FREE AND CLEAR BACKGROUND CHECK WILL BE REQUIRED IN ORDER TO BE APPROVED. Please provide an email and/or physical address where results may be sent.

Cocoplum Property Owners Association of Palm Beach, Inc.

COVER SHEET FOR PURCHASE/LEASE APPLICATION

Address: _____

Lease Dates: Start _____ End _____

Sale Closing Date: _____

Owner(s) Name: _____ Phone: _____

Realtor(s) Name: _____ Phone: _____

Purchaser(s)/Tenant(s) Name: _____ Phone: _____

Email Address: _____

Purchaser(s)/Tenant(s) Name: _____ Phone: _____

Email Address: _____

Below: Office Use Only

_____ Completed Application – Do not staple paperwork together.

_____ Clear copy of executed lease agreement or sales contract.

_____ \$150.00 non-refundable application fee per adult (no personal checks).

_____ Clear copies of each driver's license.

_____ Clear copy of each vehicle registration and photo of each vehicle.

_____ Clear color photo of each pet.

_____ Background check completed.

_____ Has applicant(s) lived in Cocoplum POA before?

_____ LEASE ONLY: A check or money order for \$500.00 refundable deposit paid by the homeowner.

_____ LEASE ONLY: Ledger (If there is a balance the application will be denied).

_____ LEASE ONLY: Violations (if there are any open violations the application will be denied).

_____ LEASE ONLY: One month's income required for each adult.

_____ LEASE ONLY: Three letters of references for each adult.

_____ LEASE ONLY: Put term of lease in set up.

Orientation date: _____

Association representative: _____

Orientation completed: _____

Application for Occupancy

Please complete all questions and fill in all blanks. If application is incomplete, this may result in your application not being processed and/or not approved. If the question does not apply, insert "N/A". Print legibly or type all information.

Address of Property: _____

Current Owner's Name: _____ Phone #: _____

Lease Term: Start _____ **End** _____ **OR** **Closing Date:** _____

1. Name: Tenant/Purchaser:

First Name

Last Name

Email Address

Phone Number

2. Name: Spouse of Tenant/Purchaser:

First Name

Last Name

Email Address

Phone Number

3. Please list full names and date of birth of **all** persons that will reside at this property and include their relationship status. For example, you can describe each relationship by indicating: buyer, tenant, buyer's daughter, tenant's cousin, etc.

Full name

Date of birth

Relationship

4. Has anyone in your household ever been charged or convicted of a crime? Yes or No
If yes, please provide the name of the individual and explain the charge(s).

5. Pet Registration Information:

a) Type of Pet (Please circle one) Dog Cat Bird Other Specify _____

Pet's Name: _____ Pet's License/Tag Number: _____

Pet's Age: _____ Pet's Weight: _____

b) Type of Pet (Please circle one) Dog Cat Bird Other Specify _____

Pet's Name: _____ Pet's License/Tag Number: _____

Pet's Age: _____ Pet's Weight: _____

6. 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) Applicant's Name:

2) Applicant's Name:

Employer _____

Employer _____

Phone _____

Phone _____

Address _____

Address _____

Position _____

Position _____

Supervisor's Name _____

Supervisors Name _____

Employed From _____ To _____

Employed From _____ To _____

Reason for Leaving _____

Reason for Leaving _____

Annual Income _____

Annual Income _____

Additional Income _____

Additional Income _____

7. Please select one box below accompanied with my signature authorizes my Association to:

Send emails for Association related business, but will continue to receive correspondence via mail.

Instead of receiving correspondence via mail to receive via email: this is also known as "Electronic Disclosure Authorization". If you have more questions please refer to the enclosed FAQ Electronic Disclosure Authorization.

Owner Email _____

Tenant Email (if applicable) _____

We will not share your information with anyone outside of Cocoplum of the Palm Beaches Property Owners Association, Inc. or the management company.

If this application is NOT legible or is not completely and accurately filled out, Cocoplum Property Owners Association of Palm Beach, Inc. will not be liable or responsible for any inaccurate information in the investigation and related report (should there be one) caused by such omission or illegibility.

By signing below the applicant recognizes that or Cocoplum Property Owners Association of Palm Beach, Inc their agent may investigate the information applied by the applicant, and a full disclosure or pertinent facts may be made to the Association. The Association may also require a credit report through a credit reporting agency.

Buyer signature _____

Date _____

Tenant signature (if applicable) _____

Date _____

FAQ on the Electronic Disclosure Authorization

1. What is an “electronic disclosure authorization?”

Your authorization when completed and submitted by you, will permit Cocoplum POA Board of Directors, Association Property Management and POA committees, to communicate with you via email.

2. Why am I being asked to complete this authorization?

It’s been a goal of your Board of Directors to improve communication in all aspects for Cocoplum POA Community. Recent changes to FL legislation dictate that certain steps be taken to protect the personal information of the members. One of those steps is a requirement to receive written authorization from those members who wish to receive electronic notices from the POA. Since electronic communication is faster, inexpensive, more efficient, and environmentally friendly, the Board of Directors has decided to ask those members wishing to receive electronic notices for their written permission.

3. What type of information will be communicated to me electronically?

It is not the goal of this Board of Directors to use email communication to replace any of the official notices that are required to be given by our governing documents and/or by applicable FL Statutes. While future email communications may discuss or relay similar information, **official required notices will continue to be sent via USPS mailing** until further notice of a policy change. **It is the desire of the Board of Directors to mainly use electronic emails to send information considered to be general in nature.**

Examples of information sent via email would be:

- Notice of upcoming POA meetings
- POA Board meeting minutes
- POA Newsletter / Schedule of Events
- POA notices of maintenance issues affecting entire community
- POA notice of outside issues that have an impact on our community (e.g. nearby road closures, local construction impact, relevant governmental issues)
- Request for input on various subjects
- Any other POA business that the Board determines appropriate.

Note: no email communication sent will be used to replace any official notices required by our governing documents and/or by applicable FL Statutes. For example, while a notice of an upcoming Board of Directors or Members Meeting may be sent via email to those who grant permission, the required meeting notifications will still be posted conspicuously on the property and notification of Members Meeting will still be sent per our governing documents or by applicable FL Statutes, via USPS mailing to all members.

4. What happens if I don’t complete the electronic disclosure authorization?

You simply will not receive email communications from the POA. You will continue to receive any communications, including official notices required to be sent by our governing documents and/or by applicable FL Statutes, via USPS mailing. Notification of Association dues will continue to be sent via USPS.

5. Will my email be shared with anyone else other than our Property Management or Board of Directors?

No. Your signed authorization grants permission for Cocoplum POA to use your email address to convey association-related information via our Property Management or Board of Directors.

6. How do I sign up?

Complete the Contact Information Form. If you have any questions regarding the Form, please contact Sea Breeze Management at (561) 626-0917 or Email laura@seabreezecms.com

Cocoplum Property Owners Association of Palm Beach, Inc.

Resident Information Sheet

The following information is needed for the computer located at the gate. This information will be kept confidential and used only for the purpose of security entry. **ONLY OWNERS MAY COMPLETE THIS FORM.**

Address: _____

OWNER CONTACT INFO:

Owner Name: _____
(Last) (First)

(Last) (First)

Phone 1#: () _____ Phone 3#: () _____

Phone 2#: () _____ Phone 4#: () _____

Emergency Contact: _____
(Last) (First)

Phone #: () _____

CURRENT OCCUPANT(S) & RENTER(S) INFO:

Current Occupant Name: _____
(Last) (First)

(Last) (First)

Phone 1#: () _____ Phone 3#: () _____

Phone 2#: () _____ Phone 4#: () _____

Emergency Contact: _____
(Last) (First)

Phone #: () _____

Permanent Guests: You will not be called if these guests arrive at the guardhouse.

Name

Name

Name

Name

Name

Name

Sea Breeze – Cocoplum of Palm Beach / Ref# _____

RESIDENTIAL SCREENING REQUEST

First: _____ Middle: _____ Last: _____

Address: _____

City: _____ ST: _____ Zip: _____

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

Tel#: _____ Cel#: _____

Current Employer

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

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

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