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

Rental Application - Interview Required (updated 6/2020)

<u>COMPLETE ITEMS 1 TO 18 & SUBMIT 30 DAYS PRIOR TO 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 APPLICATION PACKAGE AT OUR OFFICE. FAX COPIES WILL NOT BE ACCEPTED AS APPLICATION IS INCOMPLETE. If a price peeded a charge of 25 cents per page mode payable to See Preeze CMS. Inc.

If copies needed a charge of 25 cents per page made payable to Sea Breeze CMS, Inc.

Please do not staple application together.

1)	Application for Occupancy Form (all information must be completed). (pgs. 3-7)
2)	Addendum to lease provide printed name and signature of landlord(s), tenant(s) and witness. (pg. 8)
3)	Occupant certification provide date, printed name and signature of each occupant who will be renting or residing in unit. $(pg. 9)$
4)	Owner certification provide date, signature of owner(s) and witnesses. (pg. 10)
5)	Residential Screening Request indicating your salary & Disclosure & Authorization Agreement to be completed by <u>all adults renting or residing in the unit.</u> Extra copies may be needed if more than one adult. (pgs. 11 & 12)
6)	Certificate of Approval: This Form 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. 13)
7)	All occupants to review, date, sign and print your name for the Association Rules and Regulations, Guidelines and Forms Package. The rules will be reviewed at the welcome meeting. (pgs. 14-18)
8)	Owner to provide copy of the Declaration Page of the homeowner's insurance.
9)	Provide one month's proof of income with pay stubs or if retired with pension stubs. If self-employed, please submit most recent tax return.
10)	Provide a copy of the fully executed signed lease contract naming the owners, tenants and start & end date of term.
11)	Provide a copy of the registration and proof of insurance for each vehicle.
12)	Provide a copy of picture ID (driver license or passport) for each occupant renting or residing in unit.
13)	Please be advised that all landlords in Village Royale Greenridge Bldg # 7 COA, Inc. must obtain Business Tax Receipt for Rental Property in order to rent their unit. This may be obtained at the City of Boynton Beach. No application will be accepted without this license, and failure to obtain one may result in your name being given to the City as an unlicensed landlord.
14)	\$50.00 cash or money order only payable to Sea Breeze CMS, Inc.
15)	Plus \$50.00 cash or money order only payable to Village Royale Greenridge Bldg # 7 COA, Inc. for the first applicant. For each additional adult applicant other than husband/wife or parent/dependent child, add \$100.00. cash or money order only payable to Village Royale Greenridge Bldg # 7 COA, Inc.
16)	Out of the country applicants are subject to completing additional paperwork as determined by our screening company. Please contact our office prior to submitting the application to obtain additional paperwork.
17)	\$250.00 <u>CASH, MONEY ORDER OR CASHIER'S CHECK ONLY</u> for common property damage deposit to be paid by the owner and not refunded during any rental periods, payable to Village Royale Greenridge Bldg #7 COA, Inc.
18)	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.

Application Criteria

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

- 1. Application is inaccurate, incomplete or false information provided in the application.
- 2. Background report.
 - The person seeking approval (which shall include all proposed occupants) has been convicted of a crime that is of a type that is directly related to the Association's legitimate interest in protecting the health, safety and welfare of the community.
- 3. Credit report less than 600.
 - The person seeking approval has a record of financial irresponsibility, including without limitation prior bankruptcies, foreclosures or bad debts or the person does not appear to have adequate financial resources available to meet his-her obligations to the Association.
- 4. Landlord references and/or personal references.
- 5. Minimum requirement of one occupant fifty-five (55) years of age or older.
- 6. Occupant younger than eighteen (18) years of age.
- 7. Pets other than tropical fish or birds.
- 8. No portion of a Unit (other than an entire Unit) may be rented.
- 9. Airbnb, rent-sharing, the rental of a room, or renting less than the entire Unit is prohibited.
- 10. Single family residence only.
- 11. Ownership established for less than sixty (60) months.
- 12. Lease term is for less than 90 days.
- 13. Lease term is for more than one (1) year.
- 14. Property was leased more than once (1) in a twelve (12) month period.
- 15. No more than two (2) persons may occupy a one (1) bedroom and no more than four (4) persons may occupy a two (2) bedroom.
- 16. A trailer, recreational vehicle or commercial vehicle is parked at the property.
- 17. Proposed lease/renewal subject to payment in full of all outstanding assessments, fines and/or other charges, or correction of any outstanding violations, as appropriate, as a condition of the approval.
- 18. The Owner has a history of leasing his Unit without obtaining approval, or leasing to troublesome lessees, and/or refusing to control or accept responsibility for the occupancy of his Unit.

There is only one (1) assigned parking space per unit, additional vehicles may NOT be able to be accommodated at the property.

Moving in or out is permitted Monday through Saturday, 9:00am to 5:00pm Moving is PROHIBITED on Sundays or Holidays.

CURRENT INFORMATION
(All information must be printed and readable)

The Unit 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
Provide name and number of the pro	perty's caretaker/manager is	f owner resides out of state:
Name:	_ Phone:	Email:
Realtor Phone Number & Name:		

APPLICATION FOR OCCUPANCY OCCUPANT(S) INFORMATION: Information regarding each person to reside in the unit. (Use a separate sheet of

paper for information regarding all additional residents, as needed.) Name [Print-must be legible] Age Relationship to Tenant LICENSED DRIVERS: Residing in the community. Name: _____ License #: State: _____ Name: _____ License #: State: **VEHICLES:** Model Year State Registered Make Color License Number **EMERGENCY CONTACTS:** Address: Phone: 2) In case of Emergency notify: _______ Relationship: _____ Address: Phone: PERSONAL REFERENCES: (DO NOT LIST RELATIVES) Each adult 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: _____ Relationship: _____ 3) Tenant Name: ______ Name of Personal Reference: ______ Phone: _____ Address:

<u>PERSONAL REFERENCES: (DO NOT LIST RELATIVES)</u> Eac	n adult occupant i	must have 3 referen	ces.	
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 anecessary.	adult occupying th	ne unit. <u>Use separat</u>	e sheet of pa	per, if
1) Tenant Name:				
Current Address:				
//We haveowned (give length of time)				
//We haverented 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:				
/We haveowned (give length of time)				
I/We haverented 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:

<u>RESIDENCE HISTORY</u> : Provide previous residence provide residence history on a separate sheet, if neces	history for each adult occupying the unit. If less than 5 years, sary.
1) Tenant Name:	
Previous Address:	
I/We haveowned (give length of time)	
I/We haverented 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 haveowned (give length of time)	
I/We haverented 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 for all occuprevious employer information on separate page.	pants. Use separate page, if necessary. <u>If less than 5 years, provide</u>
1) Tenant Name:	2) Tenant Name:
Employer	Employer
Phone	Phone
Address	Address
Position	Position
Salary	Salary
Supervisors Name	Supervisors Name
Employed FromTo	Employed FromTo
Reason for Leaving	Reason for Leaving

I hereby give my authoriz any and all references pro		eenridge Bldg # 7 COA, Inc. or its agents to contact
Signature		Signature
Printed Name		Printed Name
Date		Date
CRIMINAL BACKGROUN I understand a Nationwide La		s required and will be completed.
1) Have you (or any other occ	upants) ever been convicted of	a State or Federal offense:
YesNo		:
2) Are you (or any other occup	pants) presently awaiting trial of	on any criminal offense?
YesNo		:
If yes to any of the above, g	give occupant's 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 their name and sign. Witnesses are required for both the landlord(s) and tenant(s) signature. Witnesses must print their name and sign.

THIS ADDENDUM is made between		("Landlord") and
	("Tenant(s)") effective this	day
20 and is intended to and shall supple	ement, amend and modify that ce	ertain Lease dated
regarding Unit	, in the following respects:	
1. Tenant(s) are subject to and shall abide by the Declaration of Covenants, Conditions and Inc. If the tenant(s) fails to comply with the retenant(s).	Restrictions for Village Royale	e Greenridge Bldg # 7 COA,
2. In the event the landlord/owner becomes decharges to the Association, the Association mobiligated to pay the rent required under the lecharges have been paid in full. During the per Landlord shall not seek to evict the tenant for	ay notify the tenant. Upon such rease to the Association, until all driod of time the tenant is paying t	notification the tenant shall be elinquent assessments and other
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 occupant 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 Village Royale Greenridge Bldg # 7 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 fully executed lease agreement is attached, and that there are no other agreements concerning this lease rental.
- 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 Village Royale Greenridge Bldg # 7 COA, Inc., and that these costs include actual damages and all costs and fees incurred for the association's attorney as may relate to the owners, tenants and/or the guests of such tenants.
- 4) That it is my responsibility to produce a lease renewal and Lease Renewal Form, provide current business certificate and property insurance verification one month prior to lease is to lease expiration if tenant is renewing.

I/we hereby authorize the Association to evict a tenant at my (unit owner) expense in any case when my tenant fails to abide by the Documents of Village Royale Greenridge Bldg # 7 COA, Inc.

I/we understand and agree to pay all fines issued by the Association's Fining committee for violations of the Association's Documents of Village Royale Greenridge Bldg # 7 COA, Inc. any and all remedies available by law to correct a violation of governing documents.

Signature of Owner:			
Signature of Co-Owner:			
Signature of Witness:			
OFFICE USE ONLY:			
Sale () Lease ()	Unit Address:		
APPROVED () DENIED () DATE:		
Board of Director's Signature or Authorized F	Board Representative:		
REASON DENIED:			
I FASE DATES: Start	Fnd	By	

Village Royale Greenridge (Bldg # 7) / Ref#_____

RESIDENTIAL SCREENING REQUEST

First:	Middle:		_ast:	
Address:				
City:		ST:	Zip:	
SSN:		_ DOB (MM/D	D/YYYY):	
Tel#:		Cell#:		
		Current En	ployer	
Company:	N/A	Tel#: _	N/A_	
Supervisor:	N/A	Salary:	N/A	
Employed From:	To:	Title:	N/A	
		Current La	<u>ndlord</u>	
Company:	<u>N/A</u>	Tel#: _		<u>N/A</u>
Landlord:	<u>N/A</u>	Rent: _		<u> </u>
Rented From:	<u>N/A</u>	To:	<u>N/A</u>	<u>\</u>
I have read and signed the Disclosure and Authorization Agreement.				
SIGNATURE:		D <i>i</i>	ATE:	

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

READ, ACKNOWLEDGED AND AUTHORIZED

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.

Print Name	
Signature	Date
For California, Minnesota or Oklahoma applican if one is obtained, please check the box.	ts only, if you would like to receive a copy of the report

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CERTIFICATE OF APPROVAL

The application for approval on its face indicates that the person(s) seeking approval intends to conduct themselves in a manner inconsistent with the covenant and restrictions or applicable Rules and Regulations to the Condominium. By way of example, but not limitation, an owner allowing an applicant to take possession of the Unit prior to approval by the Association as provided for herein, shall constitute a presumption that the conduct of the applicant is inconsistent with applicable restrictions.

Name of current owner:	
This is to certify that	
[lessees(s	s) printed names]
is/are approved by Village Royale Greenridge B	Sldg # 7 COA, Inc., a Florida Nonprofit Corporation, as
the lessees(s) of the following described real pro-	operty in Palm Beach County, Florida, to-wit:
	NE 1 st Lane Beach, FL 33435
Condominium Unit No.	in Village Royale Greenridge Bldg # 7 COA,
Inc. according to Declaration of Condominium t	thereof, recorded in Official Records Book 2260, at
Page 415 of the Public Records of Palm Beach (County, Florida and any amendments thereto.
Lease Term: Start End _	
Parking Space assigned is #	
The approval is being given pursuant to the afor Articles of Corporation.	re described Declaration of Condominium, By-laws and
Date this day of 20	_
	Village Royale Greenridge Bldg # 7 COA, Inc.
	By:
	Authorized Association President

*If unit is leased, unit owner retains access rights to the unit as landlord, but shall not have rights to use the common elements or association property except as a guest 718.106(4), F.S. Unit owner's access cards to association property will be invalid while unit is leased.

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ASSOCIATION RULES & REGULATIONS, GUIDELINES AND FORMS

Please read each page carefully. These adopted Guidelines, Rules and Regulations, and Forms are set up to help improve our shared ownership community condominium living. If you have any questions, please feel free to contact Sea Breeze CMS, Inc. office at (561) 626-0917.

 Parking Rules Oil Leak Notice Bulk Trash Pick Up Guidelines Renewal of Original Yearly Lease Feature 	orm
	rview I received copies of the above forms and agree to iation, Rules & Regulations and Guidelines.
New Tenant Printed Name:	
New Tenant Signature:	
Date:	
New Tenant Printed Name:	
New Tenant Signature:	
Date:	
Sincerely,	
Your Board of Directors of Village Royale Greenridge Bldg. 7 Condon	ninium Association, Inc.

Page **14** of **18** VRG7 - Rental Application – Updated 6/2020

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PARKING RULES

(Updated 5/2019)

- 1) No unit owner or renter is allowed to park in a guest parking space overnight.
- 2) All owners or renters must be parked in their own assigned parking space. Seasonal residents must park vehicles in their own assigned space while absent from unit.
- 3) Commercial vehicles, boats, trailers, recreational vehicles and motorcycles are not permitted to park overnight or be stored at the Association.
- 4) Any guest of the owner or renter may park overnight in resident building spaces.
- 5) No storage of vehicles, motorcycles, trailers, trucks, boats in any guest or resident building 7 spaces.
- 6) No unit owner or renter is permitted to occupy two parking spaces at any time unless another unit owner permits them the use of their parking space. If a unit owner wishes to allow another unit the use of their parking space, they must submit the "Owner's Permission to Temporarily Use Parking Space" form to the Board of Directors. Giving up your parking space to another unit owner also entails the surrender of your parking space for that period of time.
- 7) Owners that rent their unit surrender their parking space for the term of approved lease.
- 8) Vehicle repairs are not permitted at the Association.
- 9) Violators will be subject to tow at their own expense.

Sincerely,

Your Board of Directors of Village Royale Greenridge Bldg. 7 Condominium Association, Inc.

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

OIL LEAK NOTICE

www.seabreezecms.com

(Updated 5/2019)

To all unit owners and renters:

Effective immediately, any car leaking oil will be tagged. You will have fourteen (14) days in which to repair your vehicle. If the vehicle is not repaired it will be towed at the owner's expense.

A copy of the repair work must be submitted to the Board of Directors as proof that repair has been completed.

Thank you in advance for your cooperation in this matter.

Sincerely,

Your Board of Directors of Village Royale Greenridge Bldg. 7 Condominium Association, Inc.

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

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BULK TRASH PICK-UP GUIDELINES

(Updated 5/2019)

- 1. Place loose and small debris in garbage bags.
- 2. Bulk debris should be placed 3 feet from wall, on Wednesday only.
- 3. Call 561-742-6200 and provide your unit number for pick-up on Thursday.
- 4. Trash placed out before Wednesday is prohibited. Owners will be fined by the City and the Association for these types of violations.
- 5. A contractor performing work in a unit, must remove the debris from the property. The debris may not be placed for bulk pick-up. Should construction debris be disposed of at the dumpster it will prevent the trash collection from servicing the Association, as they do not pick up construction debris. If the Association hires a contractor to remove the construction debris connected to a specific unit the owner will be responsible for all fees and costs plus an administrative fee.

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RENEWAL OF ORIGINAL YEARLY LEASE FORM

(Updated 9/2019)

Renewal of extensions of expired Original Lease is	required for B.O.D. Approval
Managing Agent or Landlord	
Address	
Phone	
Premises	
Resident	
Resident	
Lease Beginning and Ending Date	
for a term of	original lease, and the above described lease, on of the extended term, except as noted. ent, payable monthly, shall be \$ payable under this agreement.
Landlord/Managing Agent	For Board of Directors Use Only1. Violation letters on record – Y/N2. Second Interview Required – Y/N3. Additional Occupant – Y/N
Resident	4. HO6 Insurance Policy – Y/N
Resident	* B.O.D. Approval of renewal YesNo
	Date: Board of Director: President: