

POMPANO BEACH CLUB CONDOMINIUM ASSOCIATION, INC
APPLICATION FOR PURCHASE

ATTENTION APPLICANT (S):

PURCHASE AGREEMENT MUST BE SUBMITTED WITH THE APPLICATION.

Please complete and list all information as requested. The application process will be delayed due to missing or illegible information.

- **SIGNATURES OF ALL PARTIES INCLUDING WITNESSES AND DATE OF SIGNING.**
- **COPY OF DRIVERS LICENSE, SSN, OR FLORIDA ID CARD.**
- **ALL INFORMATION MUST BE LEGIBLE/ORIGINAL PAPERS ARE PREFERRED.**
- **ONE ASSIGNED SPACE FOR PARKING ONE VEHICLE. DECAL REQUIRED.**
- **PROCESSING FEE OF \$125 CHECK PER APPLICANT OR PER MARRIED COUPLE.**
- **PROOF OF INCOME – PAYROLL, TAX RETURN, ETC., IF SELF EMPLOYED-
APPLICANTS MUST PROVIDE NAME OF BUSINESS & COPY OF MOST RECENT TAX
RETURN FOR VERIFICATION OF INCOME**
- **ASSOCIATION HAS UP TO (30) THIRTY DAY TO APPROVE OR DISAPPROVE THE APPLICANT.**
- **\$250 CHECK OR MONEY ORDER TO BE DURING MOVE IN AS SECURITY DEPOSIT FOR USE OF SERVICE ELEVATOR. SECURITY DEPOSIT WILL BE REFUNDED AFTER MOVE IN INSPECTION AND NO DAMAGE TO SERVICE ELEVATOR.**
- **NO PETS ALLOWED EXCEPT AS PROVIDED BY LAW.**
- **ONE ASSIGNED SPACE FOR PARKING ONE VEHICLE.**

We thank you for your interest in residing in the Pompano Beach Club Condominium. You will be contacted by management upon receipt of all paperwork and final review by the Board of Directors.

**POMPANO BEACH CLUB ASSN, INC
111 BRINY AVENUE, POMPANO BEACH, FL 33062**

APPLICATION FOR PURCHASE

- 1. ALL OCCUPANTS MUST BE APPROVED AND INTERVIEWED PRIOR TO OCCUPYING THE UNIT.**
- 2. OWNER MUST SUPPLY COPY OF RULES AND REGULATIONS TO THE APPLICANTS.**
- 3. ONE BEDROOM UNITS – NO MORE THAN FOUR OCCUPANTS.
TWO BEDROOM UNITS - NO MORE THAN SIX OCCUPANTS.**
- 4. SERVICE ELEVATOR MUST BE RESERVED IN ADVANCE FOR MOVING FURNITURE - \$250 SECURITY DEPOSIT CHECK REQUIRED (REFUNDED AT LEASE COMPLETION).**

DATE _____ **APPROXIMATE DATE OF CLOSING** _____

OWNERS NAME _____ **APT#** _____

OWNERS ADDRESS _____ **PH #** _____

NAME OF REALTOR, IF ANY: _____

PHONE # _____

NAME OF PROPOSED BUYER(S):

1. _____ 2. _____

PHONE # (s) _____

NAME OF CHILDREN (OR OTHERS) OCCUPYING UNIT:

A. _____ B. _____

C. _____ D. _____

HAVE YOU RESIDED IN THE POMPANO BEACH CLUB BEFORE?

YES, APT # _____ **NO** _____

7. ARE YOU AN ACTIVE SERVICE MEMBER SUCH AS; UNITED STATES ARMED FORCES, FLORIDA NATIONAL GUARD OR UNITES STATE RESERVE:

_____ YES OR _____ NO

Associated Credit Reporting, Inc.

Established 1985

8795 West McNab Road, First Floor, Tamarac, Florida 33321
www.associatedcreditreporting.com

*****AUTHORIZATION FORM*****

I/We hereby authorize **Associated Credit Reporting, Inc.** to obtain data to verify any and all information they request with regards to my/our Application for Occupancy, specifically the verification of my bank account(s), credit history, residential history, criminal record history, employment verification and character references.

I/We hereby waive any privileges I/we may have with respect to the said information in reference to its release to the aforesaid party. Information obtained for this report is to be released to the authorized party designated on the Application for Occupancy, for their exclusive use only. PLEASE INCLUDE COPY OF DRIVER'S LICENSE TO CONFIRM IDENTITY. If you do not have a driver's license, please include a copy of your Passport or current government issued identification card.

I/We acknowledge our rights as stated in the Fair Credit Report Act that I/we are entitled to a copy of the report upon proper written request and can dispute any inaccurate information for re-verification. I/We understand that Associated Credit Reporting, Inc. is not directly involved in the approval or denial of any applicant. The information received by Associated Credit Reporting, Inc. shall be held in strict confidence, protected as governed under the Fair Credit Reporting Act, and will never be released to any third party other than the designated recipient. I/We further understand that this is a non-refundable process.

By signing below, I/We further state the Application for Occupancy and Authorization Form were signed by me/us and was not originated with fraudulent intent by me/us or any other person and that the signature(s) below are my/our own proper legal signature. I/We certify (or declare) under penalty of perjury that I/We agree to the foregoing and; that all answers and information contained on the Application for Occupancy are true and correct and will hold Associated Credit Reporting, Inc. harmless from the result of the investigation.

(Applicant's Signature)

(Spouse's Signature)

(Applicant's Name Printed)

(Spouse's Name Printed)

(Date Signed)

(Date Signed)

POMPANO BEACH CLUB ASSOCIATION

APPLICATION FOR OCCUPANCY

PLEASE USE BLACK INK - PRINT CLEARLY

THIS APPLICATION IS FOR A SINGLE PERSON OR A MARRIED COUPLE ONLY:

NOTE: All information supplied is subject to verification. All telephone numbers must be able to be reached between 9am - 5pm.

Date _____ Purchase _____ Lease _____ UNIT # _____ Address: 111 Briny Ave Pompano Beach FL 33062

Full Name _____ Date of Birth _____ Soc Sec # _____
Single _____ Married _____ Separated _____ Divorced _____ How Long _____ Maiden Name _____

Have you ever been convicted of a crime _____ Date _____ County/State Convicted in _____
Charge (s) _____

Spouse Name _____ Date of Birth _____ Soc Sec # _____
Maiden Name _____ Ever Convicted of a crime _____ Date _____
County/State Convicted in _____ Charge (s) _____

No. of people who will occupy unit - Adults (over age 18) _____ Children (under 18) _____

Names & Ages of unit occupants' _____

Applicant's Cell Phone # _____ Applicant's email Address _____

Emergency contact _____ Address _____ Phone _____

PART I - RESIDENCE HISTORY - Last five (5) years

****PLEASE PRINT FULL ADDRESS, INCLUDING UNIT/APT #, CITY, STATE, & ZIP CODE****

Present Address _____ Phone _____

Apt/ Condo Name _____ Phone _____ Dates of residency: From _____ to _____

Own Home _____ Parent/Family Home _____ Rented Home _____ Rented Apt _____ Other _____ Rent/Mtg Amount _____

Name of Landlord _____ Address _____ Phone _____

Mortgage Holder _____ Mortgage # _____ Phone _____

Previous Address _____ Phone _____

Apt/ Condo Name _____ Phone _____ Dates of residency: From _____ to _____

Own Home _____ Parent/Family Home _____ Rented Home _____ Rented Apt _____ Other _____ Rent/Mtg Amount _____

Name of Landlord _____ Address _____ Phone _____

Mortgage Holder _____ Mortgage # _____ Phone _____

Previous Address _____ Phone _____

Apt/ Condo Name _____ Phone _____ Dates of residency: From _____ to _____
Own Home _____ Parent/Family Home _____ Rented Home _____ Rented Apt _____ Other _____ Rent/Mtg Amount _____
Name of Landlord _____ Address _____ Phone _____
Mortgage Holder _____ Mortgage # _____ Phone _____

PART II – EMPLOYMENT REFERENCES

****Include a recent copy of an earnings statement to expedite processing****

Employed by _____ Phone _____ Fax _____
Address _____ Monthly Gross Income _____
Dates of Employment from: _____ to: _____ Position _____

Spouse Employed by _____ Phone _____ Fax _____
Address _____ Monthly Gross Income _____
Dates of Employment from: _____ to: _____ Position _____

PART III – BANK REFERENCES

****Include a recent copy of a bank statement to expedite processing****

Bank Name _____ Phone _____ Checking Acct # _____
Address _____ Fax _____

Bank Name _____ Phone _____ Savings Acct # _____
Address _____ Fax _____

PART IV – CHARACTER REFERENCES (No Family Members)

****Please notify Character References that we will be contacting them to obtain a reference****

1. Name _____ Home Phone _____
Address _____ Business Phone _____
Email Address _____ Cell Phone _____
2. Name _____ Home Phone _____
Address _____ Business Phone _____
Email Address _____ Cell Phone _____
3. Name _____ Home Phone _____
Address _____ Business Phone _____
Email Address _____ Cell Phone _____
4. Name _____ Home Phone _____
Address _____ Business Phone _____
Email Address _____ Cell Phone _____

Driver's License # (Primary Applicant) _____ State Issued _____

Driver's License # (Secondary Applicant) _____ State Issued _____

Vehicle Make _____ Model _____ Year _____ Lic Plate # _____

Vehicle Make _____ Model _____ Year _____ Lic Plate # _____

If this application is not legible or is not completely and accurately filled out, Associated Credit (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility.

By signing the applicant recognizes that the Association and Associated Credit will investigate the information supplied by the applicant, and a full disclosure of pertinent facts will be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, police arrest record and mode of living as applicable. This form is for the exclusive use of Associated Credit Reporting, Inc.

Applicant's Signature _____ Date _____

Spouse's Signature _____ Date _____

Have you ever seasonally resided in Florida before? ____ If yes, please state the name, address and dates of residency:

If retires, please state the company's name and address retired from and when retired:

Have you ever been convicted or pled guilty to a crime? ____ If yes, please state the date (s), charges (s), and disposition (s) _____

VOLUNTARY INFORMATION: Do you have any physical impairment that the Association should be aware of in case of an emergency (fire, flood, etc.)? _____

1. In making the foregoing application, I represent to the Board of Directors that the purpose for the Purchase/ Lease of an apartment at POMPANO BEACH CLUB ASSOCIATION, INC. is as follows:
Permanent Residence _____ Winter Residence _____ Summer Residence _____
2. I hereby agree for myself and on behalf of all persons who may use the apartment which I seek to purchase / lease that I will abide by all of the restrictions contained in the By Laws, Rules and Regulations, Condominium Documents and restrictions which are or may in the future be imposed by the POMPANO BEACH CLUB ASSOCIATION, INC.
3. I have received a copy of all ASSOCIATION Documents: Yes _____ No _____
I have received a copy of the COMMUNITY Rules & Regulations: Yes _____ NO _____
4. I understand that I will be advised by the Board of Directors of either acceptance or denial of this application.
5. **I understand that there is a restriction on pets and that I may NOT bring a pet nor may any guest, visitor or tenant bring a pet into POMPANO BEACH CLUB ASSOCIATION, INC., nor acquire one either temporarily or permanently after occupancy.**
6. I understand that the acceptance for purchase/lease of an apartment at POMPANO BEACH CLUB ASSOCIATION, INC. is conditioned upon the truth and accuracy of this application and upon the approval of the Board of Directors. Any misrepresentation or falsification of the information on these forms will result in the automatic rejection of this application. Occupancy prior to Board of Directors approval is prohibited.
7. I understand that the Board of Directors of POMPANO BEACH CLUB ASSOCIATION, INC. may cause to be instituted an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors or any investigation bureau to make such investigation and agree that the information contained in this and the attached application may be used in such investigation, and that the Board of Directors and Officers of the POMPANO BEACH CLUB ASSOCIATION, INC. itself shall be held harmless from any action or claim by me in connection with the use of the information contained herein or any investigation conducted by the Board of Directors.

In making the foregoing application, I am aware that the decision of the POMPANO BEACH CLUB ASSOCIATION, INC. will be final and no reason will be given for any action taken by the Board of Directors. I agree to be governed by the determination of the Board of Directors.

IN WITNESS WHEREOF, I/WE have executed the foregoing application this _____ day of _____, 201__.

Applicant Signature _____ Witness _____

Applicant Signature _____ Witness _____

FOR THE BOARD OF DIRECTORS:

APPROVED _____ **DISAPPROVED** _____ **DATE** _____

If this application is NOT legible or is not completely and accurately filled out, the Association will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility. By signing, the applicant(s) recognizes that the Association may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the Association. The investigation may be made of the applicants character, general reputation, personal characteristics and mode of living as applicable.

SIGNATURE _____
Applicant

SIGNATURE _____
Spouse

AUTHORIZATION TO RELEASE BANKING, CREDIT, RESIDENCE, AND EMPLOYMENT INFORMATION.

I have named you as a reference on my application for residency.

You are hereby authorized to release and give to the below mentioned party (s) or their Attorney or Representative, any and all information they request concerning my banking, credit, residency, and employment history in reference with my/our application for residency.

DESIGNATED PARTY: POMPAÑO BEACH CLUB ASSOCIATION, INC.

I hereby waive any privileges I may have with respect to the said information in reference to its release to the aforesaid party(s).

Photocopies of the Authorization may be made to facilitate multiple inquiries. In the event you do receive a photocopy of this Authorization, it should be treated as an original and the requested information should be released to facilitate my/our application for residency.

APPLICANT SIGNATURE

NAME PRINTED

APPLICANT SIGNATURE

NAME PRINTED

DATE _____

revised 4/2020

POMPANO BEACH CLUB SOUTH ASSOCIATION, INC.

111 Briny Ave
Pompano Beach FL 33062

LESSEE DISCLOSURES

Date: _____

Unit #: _____

New Resident (s): _____

Only one (1) assigned parking space per unit. Residents must rent a second space for more than (1) vehicle (including motorcycles). Vehicles taller than 6' 5" need to be parked at Recreation Center due to low clearance in main parking garage. Residents are required to park in assigned spaces. Do not park in guest parking. Unauthorized vehicles parked in garage will be towed without notice.

Initials

I will not leave anything in utility closet or storage bin that may be a fire hazard or of a hazardous nature.

Initials

Any individual who wants to move into any unit must be pre-approved by the PBCS Board of Directors via the Application for Occupancy. You may not have an individual move in unit without approval of the Board of Directors.

Initials

I understand that this is a **NO PET** building. Any unauthorized pet will automatically be a denial for lease renewal or initiate an eviction for the lessee(s).

Initials

There is **NO WASHER OR DRYER** in the apartment. Washers/Dryers are not allowed in the apartment and they will never be installed in the unit.

Initials

I am to notify Security of all contractors, guests, etc, that will request entry to the PBCS. The security guard has the authorization to identify all individuals requesting access to PBCS property

Initials

The Association FOB security key is to be used only by the assigned user (picture) to access the building; unauthorized use by others will cause the FOB key to deactivate and a charge of \$25 to reactivate the key will be assessed.

Initials

pompano beach club

111 Briny Ave: Pompano Beach FL 33062

A \$250 check or money order payable to PBCS as a security deposit (no cash) is required prior to moving into the Pompano Beach Club Association, Inc. from each annual lease tenant.

The deposit will be returned upon proper notice from the tenant / owner to the Association for purposes of vacating the unit and the return of owner / Association property as well as no damages being observed to Association property during any move in or move out of furniture, appliances, or any other miscellaneous uses of the elevators. The Service Elevator must be reserved **IN ADVANCE** for move-in/out or other deliveries.

Initials

I understand if I receive a letter from PBCS regarding non-compliance of rules or other reported complaints, my lease may not be renewed. I understand that renovations / repairs cannot be performed after regular business hours and must have a building permit when applicable.

Initials

I will not hang anything on the balcony rails or throw anything (including cigarette butts) out the windows or from the balcony. By law, there is **NO SMOKING** in any common areas of the building.

Initials

I WILL ALLOW PEST CONTROL to be conducted in my unit each month unless I notify the Association in advance that no pest control is to be done. You may place a note on the unit door.

Initials

I/We will be billed \$50 dollars for any Fire Alarm set off due to my/our personal actions reported.

Initials

I understand no loud parties or unacceptable noise levels are permitted. I understand that a fine may be levied for any and all violations against the By-Laws, Rules & Regulations and or the Condo Documents of the building. I understand and will follow all rules and regulations of the Pompano Beach Club South Association, Inc.

Initials

VEHICLE MAKE _____ MODEL _____ REG # _____

VEHICLE MAKE _____ MODEL _____ REG # _____

The Association is not liable for any resident's personal property left in the garage areas.
Bicycles can be stored in the unit or one of three bicycle rooms in the garage areas.

Initials

PBCS Representative's Signature

Date

When going to or returning from the beach with towels, chairs, etc., I must NOT enter the Main Lobby. I will use the P-3 level door or the garage doors via the mailroom.

pompano beach club

111 Briny Ave: Pompano Beach FL 33062

_____ials