

THE

RESIDENCES

ON HOLLYWOOD BEACH CONDOMINIUM ASSOCIATION INC.

APPLICATION FOR SALE

APPROVAL PROCEDURES

**ALL DOCUMENTS MUST BE FILLED OUT IN THEIR ENTIRETY.
INCOMPLETE APPLICATION WILL NOT BE ACCEPTED.**

COMPLETED APPLICATION MUST BE SUBMITTED TO THE MANAGEMENT OFFICE A
MINIMUM OF TEN (10) BUSINESS DAYS PRIOR TO THE CLOSING DATE.

Applicant must be the primary purchaser of the unit. Applicants not legally married require separate applications. (One application per family (husband, wife, child/children)).

PLEASE PROVIDE THE FOLLOWING WHEN SUBMITTING APPLICATION:

1. Signed Contract for Sale.
2. Photocopy of Valid Driver's License or Government ID.
3. Two (2) Letters of Reference (each Applicant):
 - a. From Applicant's Bank
 - b. From Applicant's Employer/s
4. Three (3) checks made payable to: *The Residences on Hollywood Beach:*

1. Application Fee * (Non-Refundable)	\$100	* Covers cost of complete background check.
2. Administrative Set-up/Move-In Fee * (Non-Refundable, one-time fee)	\$100	* Administrative Set-Up/Move-In Fee (once approved will be deposited)
3. Move-In Security Deposit *(Refundable)	\$1,000	* If no damage to Elevators or Common Areas, after completion of move (does not apply for furnished units)

5. Occupancy Regulations:
 - a. One bedroom unit - No more than three (3) occupants
 - b. Two bedroom unit - No more than five (5) occupants

Please provide a copy of a valid driver's license or Government photo I.D.

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APPLICATION FOR SALE

OWNER / APPLICANT INFORMATION FORM

<i>PRIMARY RESIDENT / OCCUPANT CONTACT INFORMATION</i>																									
Name:	S.S. #:	Date of Birth:																							
Telephone #:	Mobile Phone #:																								
Status: <i>Single</i> <input type="checkbox"/> <i>Married</i> <input type="checkbox"/> <i>Separated</i> <input type="checkbox"/> <i>Divorced</i> <input type="checkbox"/>		Email address:																							
Other Occupants (18 yrs of age and above, include self): (**)		Other Occupants (under 18 yrs of age):																							
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left; padding: 2px;">Name</th> <th style="width: 30%; text-align: left; padding: 2px;">Age</th> <th style="width: 30%;"></th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">1. _____</td> <td style="padding: 2px;">_____</td> <td></td> </tr> <tr> <td style="padding: 2px;">2. _____</td> <td style="padding: 2px;">_____</td> <td></td> </tr> <tr> <td style="padding: 2px;">3. _____</td> <td style="padding: 2px;">_____</td> <td></td> </tr> </tbody> </table>	Name	Age		1. _____	_____		2. _____	_____		3. _____	_____		<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left; padding: 2px;">Name</th> <th style="width: 30%; text-align: left; padding: 2px;">Age</th> <th style="width: 30%;"></th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">1. _____</td> <td style="padding: 2px;">_____</td> <td></td> </tr> <tr> <td style="padding: 2px;">2. _____</td> <td style="padding: 2px;">_____</td> <td></td> </tr> <tr> <td style="padding: 2px;">3. _____</td> <td style="padding: 2px;">_____</td> <td></td> </tr> </tbody> </table>	Name	Age		1. _____	_____		2. _____	_____		3. _____	_____	
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1. _____	_____																								
2. _____	_____																								
3. _____	_____																								
<i>(**) OTHER OCCUPANTS CONTACT INFORMATION</i>																									
Name:	(Relationship)	Phone or Email:																							
Name:	(Relationship)	Phone or Email:																							
<i>SPECIAL NEEDS</i>																									
<i>Do any of the above residents have restricted mobility or a medical condition requiring special attention in the event of an emergency?</i> YES <input type="checkbox"/> NO <input type="checkbox"/>																									
<i>If yes, please explain (e.g., wheelchair, oxygen, vision/hearing impaired):</i>																									
<i>IN CASE OF EMERGENCY NOTIFY</i>																									
Name:	(Relationship)	Mobile Telephone #																							
Address:		Email Address:																							
LEGAL OWNER CONTACT INFORMATION																									
Name:		Telephone #:																							
Address:		City, State, Zip Code:																							
Mobile Phone #:		Email Address:																							

Applicant Signature _____

Date _____

Owner's Signature _____

Date _____

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ON HOLLYWOOD BEACH CONDOMINIUM ASSOCIATION INC.

APPLICATION FOR SALE

RESIDENCE HISTORY

Please Print:

A. PRESENT ADDRESS: _____
 Apt. or Condo Name _____
 Residency Dates from _____ to _____
 Landlord or Mortgage Co. _____
 Address _____
 Phone # _____

B. PREVIOUS ADDRESS: _____
 Apt. or Condo Name _____
 Residency Dates from _____ to _____
 Landlord or Mortgage Co. _____
 Address _____
 Phone # _____

EMPLOYMENT AND BANK REFERENCES

Please Print:

A. EMPLOYED BY _____
 ADDRESS _____
 DEPT./POSITION _____ HOW LONG _____
 APPROX. MONTHLY \$ _____ PHONE # _____

B. SPOUSES EMPLOYMENT _____
 ADDRESS _____
 DEPT./POSITION _____ HOW LONG _____
 APPROX. MONTHLY \$ _____ PHONE # _____

C. BANK REFERENCE _____
 ADDRESS _____
 HOW LONG _____ PHONE # _____

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RESIDENCES

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APPLICATION FOR SALE

CHARACTER REFERENCES *

*** You may not include family members**

Please Print:

- 1. NAME _____
 PHONE _____
 ADDRESS _____

- 2. NAME _____
 PHONE _____
 ADDRESS _____

Have you ever been convicted of, or pled to a crime? NO YES If YES, please attach the date (s), charge (s), and disposition (s) on a separate sheet of paper.

I understand that any false statements will be grounds for immediate Denial of Lease Approval, previous and otherwise, and will result in Eviction if residency has already been established.

PLEASE READ:

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 reports to the association caused by such omissions or illegibility. By signing below, the applicant recognizes that the pertinent facts may be made to the association. An investigation may be conducted of the applicant's character, general disposition, personal characteristics and mode of living, as applicable. The association may also require a credit report through a credit reporting agency.

APPLICANT SIGNATURE _____ DATE _____

SPOUSE'S SIGNATURE _____ DATE _____

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RESIDENCES

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APPLICATION FOR SALE

ACKNOWLEDGEMENT OF COMMUNITY POLICIES

A. RULES AND REGULATIONS

The understated, in consideration for the approval of The Residences on Hollywood Beach Condominium Association, for the purchase or lease of unit # _____ hereby agrees to be bound by all the terms and conditions of the declaration of condominium, articles of incorporation, by-laws and rules and regulations of The Residences on Hollywood Beach Condominium Association, Inc.

The undersigned tenant further agrees that in the event that they violate any of the terms and conditions of the condominium documents or rules and regulations that they will be subject to eviction.

I have read and understood all the aforementioned documents and rules and regulations and agree to be bound by them as a resident of The Residences on Hollywood Beach Condominium Association, Inc.

SIGNATURE TENANT _____ DATE _____

SIGNATURE TENANT _____ DATE _____

B. STRUCTURAL MODIFICATIONS

I understand that no structural modifications to the unit or otherwise may be made without the written consent of the Board of Directors and may not be initiated by tenants/lessor. Additionally, all contractors used in any such approved modification, must be licensed and insured, and have proper permits prior to beginning any work.

APPLICANT SIGNATURE _____ DATE _____

SPOUSE'S SIGNATURE _____ DATE _____

THE

RESIDENCES

ON HOLLYWOOD BEACH CONDOMINIUM ASSOCIATION INC.

APPLICATION FOR SALE

ACKNOWLEDGEMENT OF PET RULES & REGULATIONS

- 1. A complete Pet Registration Form, including **photo** and **valid rabies inoculation certificate**, must be provided to the Management Office.
- 2. Pet Limit: Two (2) pets per unit.
- 3. Pet Weight Limit: Twenty (20) lb. **AT MATURITY**. Pets weighing more than 20 lbs. will not be permitted on the property.
- 4. Domestic dogs and/or cats are permitted to be maintained in a Unit provided such pets are kept by applicable laws and applicant laws and regulations, and are not a nuisance to residents of their Units or of neighboring building.
- 5. Aggressive Pets (including, but not limited to, pit bulls, reptiles or any other pet considered “not safe and appropriate” by the Board of Directors), will not be permitted on the property at any time.
- 6. Pets will only be permitted in the following designated pet friendly areas:
 - a. The dog walk area
 - b. Alternate dog walk area (ask security)
 - c. Service elevator
- 7. Pets are required to be kept on a leash (not exceeding six (6) feet in length) and accompanied by an adult at all times.
- 8. Pet owners are responsible for cleaning up after their pets. (FINES OR EVICTION MAY RESULT FOR NON-COMPLIANCE).
- 9. Diseased pets of any kind are not permitted anywhere on the property. If prior written consent was issued by the Board of Directors, The Association and The Board of Directors reserves the right to revoke such written consent if the pet has become a hazard or nuisance to the Association, or if the Pet Rules & Regulations have not been followed.
- 10. Pets may not be left unattended on balconies or in corridors at any time.
- 11. The unit owner or tenant assumes full responsibility for damages to the property caused by their pet. In the event of damage by a pet, the Board of Directors will assess the damages and forward the expense of the repairs to the unit owner and/or tenant.
- 12. **Failure to comply with any of the above-mentioned Pet Rules & Regulations, subject resident to a \$100 fine, per offense and may lead to eviction.**

Signature: _____

Date: _____

Signature: _____

Date: _____

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ON HOLLYWOOD BEACH CONDOMINIUM ASSOCIATION INC.

APPLICATION FOR SALE

PET REGISTRATION FORM

Legal Owner Name ("Owner")			Indiv/Corp/LLC/Ptnshp (circle one)		
Primary Resident / Occupant Name			Home/Cell Tel. #		
Pet Information					
Name		Type: Dog Cat Bird (circle one)			
Age		Gender	Weight	Other:	
Breed			License		
Description			<i>Color</i>		
<div style="border: 3px double black; padding: 20px; width: 80%; margin: auto;"> <p style="font-size: 1.2em; font-weight: bold;">Please attach photo of pet here</p> </div>					
Acknowledgment & Agreement					
I/We am/are aware of the Association rules, regulations and restrictions regarding pets on the Property and agree to abide by them to the fullest extent.					
Signed			Date		
Signed			Date		

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RESIDENCES

ON HOLLYWOOD BEACH CONDOMINIUM ASSOCIATION INC.

APPLICATION FOR SALE

VEHICLE REGISTRATION FORM

Unit No.		Date
Legal Owner Name ("Owner")		<i>Indiv/Corp/LLC/Ptnshp</i> (circle one)
Primary Resident /Occupant Name		<i>Owner / Lessee</i> (circle one)
Vehicle 1		
<i>Make</i>	Model	
Year	Color	
<i>Tag #</i>	<i>State</i>	
<i>*Please note that parking is valet ONLY.</i>	Decal Number	
Vehicle 2		
<i>Make</i>	Model	
Year	Color	
<i>Tag #</i>	<i>State</i>	
<i>*Please note that parking is valet ONLY.</i>	Decal Number	
Acknowledgment & Agreement		
I/We am/are aware of the Association rules, regulations and restrictions regarding vehicles on the property and agree to abide by them. Vehicles must be parked by valet only. All unauthorized vehicles may be towed by Association at vehicle owner's expense.		
Signed		Date
Signed		Date

- * No commercial vehicles, trucks, boats, trailers, motor homes, mobile homes, campers or recreational vehicles will be permitted to park on the premises at any time.
- * Parking Decals: Max of two (2) Valet Parking permits per unit (3 or 4 bedroom units are excepted at a max of 4).
- * SELF PARKING: Remote transmitters may be purchased at \$100.00 each for self parking

NO PARKING IN DESIGNATED VALET USE ONLY SPACES OR SHORT TERM PARKING SPACES

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PARCEL RECEIPT AUTHORIZATION

APPLICANT: _____ CO-APPLICANT/SPOUSE: _____

This document will authorize The Residences on Hollywood Beach Condominium Association, Inc. and its staff to accept all of the following that require signature:

- o Packages (UPS, FedEx, USPS, Courier, etc.)
- o Flowers, gifts, basket deliveries and other perishables.
- o Prescriptions.
- o Time sensitive, Certified or Registered Mail.

In consideration for being permitted the accommodation and benefit or leaving or having property received, including but not limited to packages, flowers, gifts, basket deliveries, prescriptions, perishables, mail or any other items whatsoever (the "Property") with the Association's employees, or any agent or contractor of the Association, or any other personnel (collectively referred to as the "Personnel") for pick-up, delivery or for any reason whatsoever on the undersigned's behalf, the undersigned owners/residents hereby release, indemnify and hold harmless the Association, its directors and officers, and the Personnel, from and against all claims, damages, losses and expenses, including attorney's fees at both the trial and appellate level, arising out of any claims for loss, theft, damage and or destruction of the Property whether caused in whole or in part by any negligent act or omission of the Personnel. The Association shall have the right to limit or condition performance of the above-referenced services as the Board of Directors may reasonably determine from time to time in the exercise of its sole discretion, including but not limited to, the right to eliminate any of the above-referenced services.

The undersigned hereby acknowledge that the Personnel are authorized to accept receive and/or deliver Property at the undersigned's sole risk. The undersigned further acknowledge that the Association is not willing to provide the above-referenced services to the undersigned owners/residents without the benefit of this Release and agree that the services by the Association pursuant hereto are performed as a courtesy and an accommodation to the owners/residents and are not part of the responsibilities or duties of the Association. Accordingly, the undersigned agree that the Association and the Personnel shall have no responsibility or liability for any claims, damages, losses or expenses arising directly or indirectly from the performance of any of the above services on behalf of the undersigned.

Furthermore, the undersigned agrees that any Property accepted on the undersigned's behalf that is not picked up by the undersigned within five (5) working days (Monday-Friday) of delivery, may be returned to the sender by the Association.

Each resident of the unit must execute this form for it to be effective for all persons residing in the unit.

Authorization granted.

Applicant Signature

DATE _____

Co-Applicant/Spouses Signature

DATE _____

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**AUTHORIZATION FOR RELEASE OF
BANKING, RESIDENCE, EMPLOYMENT, CREDIT REPORT, & POLICE INFORMATION**

By signing below, the landlord(s), bank(s), mortgagee(s), financial institution(s), employer(s) which are listed in Parts I and II of the Application are hereby authorized to release to the Association, its officers, directors, representative, any and all information requested concerning my/our banking, credit, residence and employment. Further, the Association, its officers, directors, employees, agents, Management Company, attorney, may disclose any attachments set forth in this Application and any attachments thereto or any information obtained from the bank(s), mortgagee(s), financial institutions, police departments, employer(s) to third parties, such third parties to include but not be limited to the owner(s) of the unit subject to the proposed lease or sale. I/We agree to release, indemnify and hold harmless the Association, its officers, directors, employees, agents, Management Company, and attorney, from any and all claims for losses or damages that may result from or are in any way connected with the disclosure of the information obtained by them to third parties, such third parties to include but not be limited to the owner(s) of the unit subject to the proposed lease or sale.

APPLICANT SIGNATURE

DATE

PRINT NAME LEGIBLY

CO-APPLICANT/SPOUSES

DATE

PRINT NAME LEGIBLY

THE

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NOTICE AND ACCEPTANCE OF STANDARDS FOR CONTROL OF SOUND TRANSMISSION AND IMPACT ISOLATION (FLOOR COVERINGS)

Weight, Sound and other Restrictions. Unless installed by the Developer or meeting the sound insulation specifications established from time to time by the Board, hard and/or heavy surface floor coverings, such as tile, marble, wood, and the like will be permitted only in foyers, kitchens and bathrooms. **Although prior Board approval is not required, the installation of any hard and/or heavy surface floor coverings must meet the following specifications:** the aggregate sound isolation and acoustical treatment shall carry a minimum Sound Transmission Classification (STC) of 55, and the installation of the foregoing insulation materials shall be performed in a manner that provides proper mechanical isolation of the flooring materials from any rigid part of the building structure, whether of the concrete subfloor (vertical transmission) or adjacent walls and fittings (horizontal transmission) and must be installed prior to the Unit being occupied. Notwithstanding the foregoing, the floor coverings (and insulation and adhesive material therefore) installed on any balcony, terrace, patio and/or lanai shall not exceed a thickness of ¾". Additionally, all tile finishes on balconies, terraces, patios and/or lanais shall have a waterproofing system that is compatible with the standards adopted from time to time by the Association. The installation of any improvement or heavy object must be submitted to and approved by the Board, and be compatible with the overall structural design of the building. All areas within a Unit other than foyers, kitchens and bathrooms, unless to receive floor covering approved by the Board, are to receive sound absorbent, less dense floor coverings such as carpeting or hard surface floor coverings meeting the specifications described above. The Board will have the right to specify the exact material to be used on balconies, terraces, patios and/or lanais. Any use guidelines set forth by the Association shall be consistent with good design practices for the waterproofing and overall structural design of the Building. Owners will be held strictly liable for violations of these restrictions and for all damages resulting there from and the Association has the right to require immediate removal of violations. Applicable warranties of the Developer, if any, shall be voided by violations of these restrictions and requirements. Each owner, by acceptance of a deed or other conveyance of their Unit, hereby acknowledges and agrees that sound transmission in a high-rise building such as the Condominium is very difficult to control, and that noises from adjoining or nearby Units and or mechanical equipment can often be heard in another Unit. The Developer does not make any representation or warranty as to the level of sound transmission between and amount Units and the other portions of the Condominium Property, and each Unit Owner shall be deemed to waive and expressly release any such warranty and claim for loss or damages resulting from transmission. Notwithstanding anything herein contained to the contrary, the installation of insulation under hard surfaced floor coverings shall not be required for any Unit that is not located above another Unit or above Common Elements that may reasonably be considered by the Board to be areas of general circulation (e.g. lobbies, hallways, mailrooms, if any, etc.), and/or recreational areas. Accordingly, if a Unit has no improvements below it, or only the parking garage or a mechanical room below it, it shall not be required to install insulation under hard surface floor coverings.

UNIT #	In "The Residences on Hollywood Beach", a Condominium
APPLICANT SIGNATURE	DATE
CO-APPLICANT/SPOUSES SIGNATURE	DATE

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RESIDENCES

ON HOLLYWOOD BEACH CONDOMINIUM ASSOCIATION INC.

APPLICATION FOR SALE

CAPITAL CONTRIBUTION FEE DISCLOSURE STATEMENT

The Residences on Hollywood Beach Condominium Association, Inc. (“The Association”) requires all new unit owners to contribute an amount equal to two (2) month’s maintenance fees as a capital contribution fee which will be deposited into the working capital account/s of The Association and used for such purposes described as capital expenditures of The Association. The capital contribution fee is due upon the closing date of the purchase of the condominium unit.

The capital contribution fee will not be used for operational expenditures of The Association. The capital contribution fee will not be used for, or applied to, the current or future monthly maintenance obligations of the unit owner.

I have read and understood the aforementioned Capital Contribution Fee Disclosure Statement:

Seller : _____

Purchaser : _____

Purchaser’s Signature

Date

Print Name Legibly

Co-Purchaser’s/Spouses Signature

Date

Print Name Legibly

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ON HOLLYWOOD BEACH CONDOMINIUM ASSOCIATION INC.

APPLICATION FOR SALE

MOVE-IN INFORMATION FORM

1. Plans to move in should be made only after approval has been issued.
2. **ELEVATOR RESERVATIONS MUST BE MADE THROUGH THE MANAGEMENT OFFICE AT LEAST 72 HOURS PRIOR TO MOVING IN. TEL: 954-925-9416**
3. Moving is permitted Monday thru Friday, between the hours of **8:00 AM and 4:30 PM ONLY.**
4. Moving is **not allowed** on Saturdays, Sundays, holidays, or after 4:30 PM.
5. No items may be stored or left in the receiving area.
6. Moving/delivery company must remove all cartons, crates and packing material from the area.
7. No overnight storage is permitted in the loading dock area, building hallways, or other common areas.
8. Oversized items that will not fit into the elevator must be scheduled for transport by special arrangement. Contact Management office for details.
9. The approximate dimensions of the elevator are:

	<u>Door</u>	<u>Cab</u>
Height	7'0"	9'4"
Depth		6'9"
Width	3'6"	7'0"
 Weight Capacity	 3500 lbs.	

I/WE agree that for all work performed or delivered to improve and/or furnish my condominium unit by any parties performed on my behalf, or by such parties as my agent, I assume full responsibility for damages, whether to any person or property, any hereby agree to indemnify and hold harmless The Residences Condominium Association, Inc. (the "Association") for any damages claimed by any party.

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____



APPLICATION FOR SALE

GENERAL INFORMATION

ENTRY INFORMATION:

- 1. An Entry FOB (small blue apparatus) is required for gaining access into and throughout the building. It is available at a cost of \$25.00 per apparatus (non-refundable). It is a visually activated piece of equipment that gives you access throughout the building.
- 2. Please visit the Management office upon establishing occupancy to acquire your FOB. Your picture will be taken for our security system. Office hours are Monday thru Friday, 9:00 a.m. to 5:00 p.m.

GENERAL PARKING INFORMATION:

- 1. **Prior to issuance of a parking permit/decal, vehicle registration, driver’s license, and resident information will be verified and recorded in an electronic database which will be used to enforce the parking policies.**
- 2. A maximum of two (2) valet parking permits/decals are allowed per unit. A valid parking permit must be visibly displayed on the driver side front window of each registered vehicle.
- 3. Valet parking is complimentary **only for registered vehicles** displaying a valid parking permit/decal.
- 4. All guests (no exceptions) must valet park at a rate of four (4) dollars daily or five (5) dollars overnight. A Valet parking pass may be purchased from Valet for guest parking or additional vehicle parking at a rate of one hundred (\$100) dollars monthly or thirty (\$30) dollars weekly.
- 5. A resident may purchase up to two (2) remote controls per unit for the purpose of Self Parking at a price of One Hundred (\$100) dollars each (non-refundable). Remote controls are the property of the purchaser. The Association is not responsible for loss. Upon expiration of a lease or sale of a unit, parking privileges will be cancelled and any remote controls previously purchased will be deactivated.
- 6. No repair or washing of vehicles is allowed within the parking areas.
- 7. Please visit the Management office upon establishing occupancy to acquire your parking permit/decal. Your official vehicle registration and driver’s license will be required in order to issue parking permit/decal and you must complete the Parking Policy registration forms. Office hours are Monday thru Friday, 9:00 a.m. to 5:00 p.m.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____