BROWN'S BACKGROUND CHECKS
CONSENT TO OBTAIN CONSUMER REPORT ON SUBSCRIBER
The Jockey Club Condominium Apartments Inc.

I understand that you may obtain consumer reports that relate to my credit and/or criminal history. This information will, in whole or in part, be obtained from AISS, a Sterling Infosystems Company, 6111 Oak Tree Blvd, 4th floor, Independence, OH 44131, telephone 800.853.3228. I understand that you may be requesting information from various federal, state and other agencies or institutions, which maintain public and non-public records concerning my past activities relating to my credit and/or criminal history. This information will be reviewed by the Association and may be reviewed by a unit owner if it's a rental.

I authorize, without reservation, any party, institution, or agency contacted by AISS to furnish the above mentioned information:

Applicant Name _____ Date of Birth* ___/___/___ Social Security Number _____
*Date of Birth is requested in order to obtain accurate retrieval of records.
If International please provide Passport Number

Co-Applicants Name _____ Date of Birth ___/___/___ Social Security Number _____
If International please provide Passport Number

Alias/Previous Name(s) _____

Current Physical Address _____ City & State _____ Zip code _____

☐ California, Minnesota & Oklahoma Applicants Only: Please check here to have a copy of your consumer report sent directly to you.

Notice to CALIFORNIA Applicants

Under Section 1786.22 of the California Civil Code, you have the right to request from AISS, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you, which AISS has previously furnished within the two-year period preceding your request. You may view the file maintained on you by AISS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone.

SIGNATURE _____ DATE _____

Co-Applicant
SIGNATURE _____ DATE _____

JOCKEY CLUB CONDOMINIUM APTS, INC
PHASE 1 APPLICATION PACKAGE

Unit #: _____

Name(s): _____

The Jockey Club

11111 Biscayne Boulevard Miami, Florida 33181
Phone: (305) 899-1237 Fax: (305) 893-8446
jockeyclubcondo1@bellsouth.net

ATTENTION ALL UNIT OWNERS.
PROSPECTIVE RESIDENTS

All new residents (owners and/or tenants) are required to apply with **JOCKEY CLUB CONDOMINIUM APARTMENTS, INC.** prior to moving in. The application process could take roughly two to three weeks (international applications may take four to six weeks). A proposed buyer or tenant MUST be approved before moving in. You MUST obtain the required forms from the office of:

The Jockey Club Condominium Apt. Inc.
11111 Biscayne Boulevard
Miami, Florida 33181
Phone: (305) 899-1237
Fax: (305) 893-8446

All applications MUST be submitted to **JOCKEY CLUB CONDOMINIUM APARTMENTS, INC.** All forms must be 100% complete and correct and must be signed by the appropriate parties. Incomplete applications WILL NOT be accepted nor processed. The following must be included with the application:

_____ Application fee of $100.00 for legally married couples. Any other applicant over 18 year of age must pay an additional $100.00 per applicant made payable to: **JOCKEY CLUB CONDOMINIUM APARTMENTS, INC. (Cashier check or money order only).**

_____ Elevator security deposit fee of $500.00 made payable to: **JOCKEY CLUB CONDOMINIUM APARTMENTS, INC. (Cashier check or money order only).**

_____ If this application is for sale, an estoppel MUST be requested before or at the time this application is submitted. **ESTOPPEL FEE OF $250.00 (standard) is required ($100.00 additional fee to expedite)** and is made payable to: **JOCKEY CLUB CONDOMINIUM APARTMENTS, INC. (Cashier check or money order only).**

_____ Include signed copies of the last two years of income tax return, SSI (if retired), and the last two months of bank/brokerage statements **(accountant letters will not be accepted).** If financial records are not acceptable to the Association in the exercise of its reasonable discretion, then the applicant must provide for a cash deposit equal to 100% of one year's assessments, including special assessments, or, a letter of credit to the Association from a bank in the United States which is acceptable to the Association in their reasonable discretion.

_____ Signed copy of the contract for sale or lease.

_____ Completed application including all additional forms and addendums with a copy of all applicants' driver licenses or photo IDs and proof of citizenship or residency status (i.e. passport, birth certificate, visa, legal alien card, etc.).

If applicant has not live in The United State for the last five (5) years he/she is considered an international applicant and there is an additional fees (contact office for additional fee) and the processing time may take approximately four to six weeks. Please complete attached disclosure an authorization form.

When a complete application package is received we will commence the process for the background screening. Once the background screening is completed, we will be forward the application to the Board of Directors for approval.

The application process could take roughly two to three weeks (international applications may take four to six weeks). **All inquiries in reference to the application process must be done by e-mail to jockeyclubcondo1@bellsouth.net.**

Sincerely,

Application Department
The Jockey Club Condominium Apt. Inc.

JOCKEY CLUB CONDOMINIUM APTS, INC

Application for Occupancy

FILL IN ALL BLANKS APPLICATIONS WILL BE RETURNED IF NOT FULLY COMPLETED!!

Note: Please note all applicants over the age of 18 (not married to primary applicant) must complete separate application.

Date: _____ Desired Date of Occupancy: _____

This Application is for a: Lease ( ) Purchase ( ) Of Unit # _____

Property Address: _____

Realtor's Name: _____ Phone # _____

Applicant's Name_____

Phone# _____ Cell Phone# _____

E-Mail Address: _____

SSN#_____ DOB _____

DL # _____ State _____

MARITAL STATUS: Married ( ) Separated ( ) Divorce ( ) Single ( )

Spouse's Name: _____

Phone# _____ Cell Phone# _____

E-Mail Address: _____

SSN#_____ DOB _____

DL # _____ State _____

No. Of People who will occupy the unit: _____

LIST OF ACCUPANTS

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

PETS

Yes ( ) No ( ) How Many? Weight: _____ Type: _____

VEHICLES

Make: _____ Model: _____

Tag # _____ State: _____ Year: _____

Make: _____ Model: _____

Tag # _____ State: _____ Year: _____

RESIDENCE HISTORY

Present Address: _____

City_____ State_____ Zip _____ OWN ( ) RENT ( ) Years

Name of Landlord_____ Phone # _____

Previous Address: _____

City_____ State_____ Zip _____ OWN ( ) RENT ( ) Years

Name of Landlord_____ Phone # _____

Previous Address: _____

City_____ State_____ Zip _____ OWN ( ) RENT ( ) Years

Name of Landlord_____ Phone # _____

Previous Address: _____

City_____ State_____ Zip _____ OWN ( ) RENT ( ) Years

Name of Landlord_____ Phone # _____

EMPLOYMENT HISTORY

ARE YOU: Self-Employed? Yes ( ) No ( ) Retired? Yes ( ) No ( )

Present Employment:

Employer Name: _____

Address: _____

City _____ State _____ Zip _____ Phone # _____

From: _____ To _____ Dept or Position: _____

Supervisor: _____ Monthly Income_____

Previous Employer: Employer Name: _____

Address: _____

City _____ State _____ Zip _____ Phone # _____

From: _____ To _____ Dept or Position: _____

Supervisor: _____ Monthly Income_____

Spouse Employer

Present Employment: Employer Name: _____

Address: _____

City _____ State _____ Zip _____ Phone # _____

From: _____ To _____ Dept or Position: _____

Supervisor: _____ Monthly Income_____

Previous Employer: Employer Name: _____

Address: _____

City _____ State _____ Zip _____ Phone # _____

From: _____ To _____ Dept or Position: _____

Supervisor: _____ Monthly Income_____

REFERENCE (No Relatives)

Name _____ Years Known_____

Address: _____

City _____ State _____ Zip _____ Phone # _____

Name _____ Years Known_____

Address: _____

City _____ State _____ Zip _____ Phone # _____

Name _____ Years Known_____

Address: _____

City _____ State _____ Zip _____ Phone # _____

LEASE ADDENDUM

In the event the Lesser is delinquent in his or her obligation to pay to the Association any general or special maintenance assessments, or any installment, the Association shall have the right, but not the obligation, to require the Lessee to pay said rental installment, or a portion thereof sufficient to pay said delinquent maintenance assessments, directly to the Association, upon the Association giving written notice of exercise of such right to the Lessee and Lesser. The right of the Association is cumulative and in addition to any and all other rights or remedies the Association may have against the Lessee or Lesser.

Initials: _____

RULES & REGULATION

I, _____, acknowledge that a copy of the rules and regulations of the Association have been included on this package. If I wish to receive a full copy of the Bylaws the full package is purchasable at the Jockey Club Condominium office. I understand that all members of my household and/or any guests are required to comply with all rules of the Association.

Signature _____ Date _____

Have any of the applicants ever been arrested for any other than a minor traffic violation

Yes ( ) No ( ) Convicted Yes ( ) No ( )

Name of applicant_____

If yes please explain:_____

Applicant represents that all information given is true and correct, and understands that as part of our procedure for processing your application, an outside screening agency, will make an investigation from the information given and present their finding to Jockey Club Condominium Apartments, Inc, GRS Management Inc, and the unit owner for review. This investigation may include, but is not limited to, character, general reputation, credit, residence and criminal search. Applicants agree not to hold the Association or its agent or GRS Management, Inc or the unit owner liable for the discovery or non-discovery of information or any actions taken as a result of this investigation. Authorization is hereby given to release banking, credit, residency, employment and other information pertinent to this application.

Signature: _____ Date: _____

JOCKEY CLUB CONDOMINIUM APTS., INC.
11111 BISCAYNE BLVD.
MIAMI, FL 33181
OFFICE (305) 899-1237 * FAX (305) 893-8446

REQUEST FOR VERIFICATION OF EMPLOYMENT

Applicant: _____ Social Security No.: _____

The undersigned hereby authorizes the release of any and all information as requested by this form. Furthermore the undersigned hereby waives any and all privileges with respect to the said information and the reference to the aforesaid parties.

_____ _____
Applicant's Signature Date

Name & Address of Employer:

_____

_____

_____

Phone ( ) Fax ( )

Contact Name: _____

Please Return Completed Form To:
PRECISION PERSONNEL SCREENING
1350 NE 125 St., Suite 201
North Miami, FL 33161
Phone (305) 895-1350 Fax (305) 895-2655
E-mail: mlenchner@aol.com

1. Position 2. Dates of Employment 3. Eligible for Rehire?

_____ _____ _____

4. Gross Base Pay

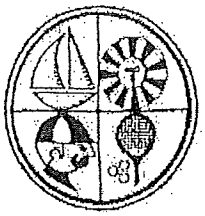
$_____ ___ Annual ___ Monthly ___ Weekly ___ Bi-Weekly ___ Hourly

5. Comments: _____

_____

_____ _____
6. Verifier Signature 7. Name (please print)

_____ _____
8. Title 9. Date



The Jockey Club

Jockey Club Condominium
Apartments, Inc.
Phase 1 Building
11111 Biscayne Boulevard
Miami, Florida 33181
Phone: (305) 899-1237

PROPERTY OWNER'S INFORMATION

Please complete below and return to the management office. It is very important that we have updated phone numbers and emails in the event of an emergency regarding your property. Please help us to better serve you and the community as a whole by completing the owner's information sheet. This sheet can be emailed back to our office at jockeyclubcondo1@bellsouth.net or faxed to 305-893-8446.

Date: _____ Unit/Account Number: _____

Owner's name: _____

Phone: _____ Alt. Phone: _____

Email: _____

Mailing Address: _____

Other Contact Person: _____

Phone: _____ Alt. Phone: _____

Email: _____

Please complete tenant information

Tenant Name: _____

Phone: _____ Alt. Phone: _____

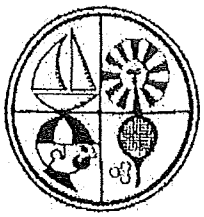
Email: _____

****

For Official Use Only

Date Received: _____ Date Completed: _____

Completed By: _____



The Jockey Club

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Apartments, Inc.
Phase 1 Building
11111 Biscayne Boulevard
Miami, Florida 33181
Phone: (305) 899-1237

Resident Security Form

Date: _____

Building Number: _____ Unit Number: _____

Phone: _____ Alt. Phone: _____

Resident #1:

First Name: _____ Last Name: _____

Vehicle Make & Model: _____ Transponder #: _____

Year: _____ Color: _____ Tag #: _____ Decal #: _____

Resident #2:

First Name: _____ Last Name: _____

Vehicle Make & Model: _____ Transponder #: _____

Year: _____ Color: _____ Tag #: _____ Decal #: _____

Resident #3:

First Name: _____ Last Name: _____

Vehicle Make & Model: _____ Transponder #: _____

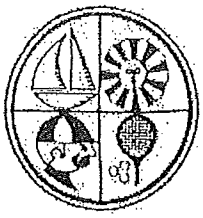
Year: _____ Color: _____ Tag #: _____ Decal #: _____

Resident #4:

First Name: _____ Last Name: _____

Vehicle Make & Model: _____ Transponder #: _____

Year: _____ Color: _____ Tag #: _____ Decal #: _____



The Jockey Club

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Phase 1 Building
11111 Biscayne Boulevard
Miami, Florida 33181
Phone: (305) 899-1237

Elevator Reservation

The elevators in the building are eligible to be reserved. Please complete the below portion with the date(s) you wish to reserve the elevator and return the completed form to the condominium office. Furthermore, any damages caused to the elevator will be the responsibility of the unit owner or approved tenant. A staff member will contact you in order to confirm the availability of the elevator for the date(s) you are requesting.

Date: _____ Unit Number: _____

☐ Owner / ☐ Tenant Resident/Occupant Name: _____

Property Address: _____

Phone: _____ Alt. Phone: _____

Email: _____

Elevator Reservation Date(s): _____

****

For Official Use Only

Date Received: _____ Date Completed: _____

Completed By: _____